

L13000071510

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

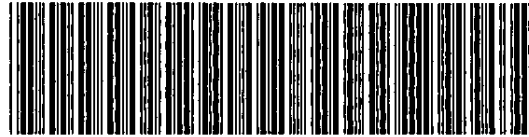
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2013 JUN 10 PM 12:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **MLAT ENTERPRISES, LLC**

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Melissa Potthoff

Name of Person

Firm/Company

330 NW 190 Avenue

Address

Pembroke Pines, FL 33029

City/State and Zip Code

mlpotthoff@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Melissa Potthoff

Name of Person

at **(1954) 609-9392**

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ☐ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☒ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E062 (4/13)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2013 JUN 10 PM 12:00

FILED

**ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted **within the required 30 business days** to correct the **attached** articles of organization or application to transact business in Florida.

FIRST: The name of the limited liability company is:
MLAT ENTERPRISES, LLC

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

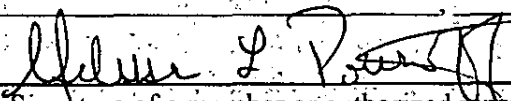
☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:
The name was erroneously transmitted as: MLAT ENTERPRISES, LLC and
should be changed to: MLAP ENTERPRISES, LLC

The name of the managing member was erroneously transmitted as "Melissa
Totthoff" and should be changed to: "Melissa Potthoff"

OR

☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Dated: June 05 2013


Signature of a member or authorized representative of a member

Melissa Potthoff

Typed or printed name of signee

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

2013 JUN 10 PM 12:00
CLERK OF STATE
TALLAHASSEE, FLORIDA

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