

# L14000047643

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

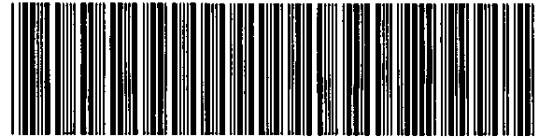
(Business Entity Name)

(Document Number)

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2014 APR 25 PM 4:24

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER  
MAY -1 2014

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** The Meaningful Life Center, LLC

Name of Limited Liability Company

Dear Sir or Madam:

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

Please return all correspondence concerning this matter to the following:

Stefanie D. Lindlau

Name of Person

The Meaningful Life Center, LLC

Firm/Company

2006 Town Plaza Ct

Address

Winter Springs FL 32708

City/State and Zip Code

meaningfullifecenter@gmail.com

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

For further information concerning this matter, please call:

Stefanie D. Lindlau

407

617-6086

at (

Name of Person

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

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

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

**FIRST:**

The name of the limited liability company is: The Meaningful Life Center, LLC

**SECOND:**

The Florida Document number of the limited liability company is: L14000047643

**THIRD:**

Document to be corrected is:  
Articles of Organization

**(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 address listed as the street address and mailing address and the address

for the registered agent contains and apartment number: "APT.2505". (Articles

II and III). The address should not contain an apartment and should be listed as:

2006 Town Plaza Court Winter Springs, FL 32708

**OR**

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OR**

The electronic transmission of the record was defective.

Stephanie D. Sirelman  
Signature of Authorized Representative

3/24/14  
Date

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