

L4000104764

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TALLAHASSEE, FLORIDA

FEB 11 2015
S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JEFFERY G DARRAH 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:

Lonnie Young
Name of Person

Young + Company LLC
Firm/Company

3599 W. LAKE MARY BLVD STE A
Address

LAKE MARY FL 32746
City/State and Zip Code

LYoung@USATAXHELP.COM
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Lonnie Young at (907) 936 2500 x107
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: Jeffery G DARRAH LLC

SECOND: The Florida Document number of the limited liability company is: LL4000104764

THIRD: Document to be corrected is:

NAME of LLC

(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:

FIRST NAME SPOelled incorrectly

INCORRECT JEFFERY

SHOULD BE JEFFREY G DARRAH LLC

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.

X Jeffery G. Darrah
Signature of Authorized Representative

X 1-26-15
Date

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

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