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K. SALY EXAMINER

AUG 28 2014

To: FL Corporation Division.

Please find the Articles of Correction for the Limited Liability Company Mitch David Laboratories LLC

Please find enclosed a check for \$25 for this request.

If there are any questions regarding this filing please call Jessica Marschke at 1-800-981-7183 ext. 1267618

Please return all completed documents to:

Business Filings Incorporated Attn: Filing Department 8020 Excelsior Drive, Suite 200 Madison, WI 53717

Best Regards,

Filing Department Business Filings Incorporated

COVER LETTER

TO:

Registration Section Division of Corporations

MITCH DAVID LABORATORIES 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:

Jessica Marschke

Name of Person

Business Filings Incorporated

Firm/Company

8020 Excelsior Dr., Suite 200

Address

Madison, WI 53717

City/State and Zip Code

agent@bizfilings.com

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

For further information concerning this matter, please call:

Jessica Marschke

., 800

981-7183

Name of Person

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassec, 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 (12/13)

STATMENT 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. THE STATE OF THE S The name of the limited liability company is: FIRST: MITCH DAVID LABORATORIES LLC SECOND: 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: Incorrect Statement: Article IV: Managers/Members The management of the limited liability company is reserved for the members and the name and address of each member of the limited liability company is: David Fhima, 8201 Chemin Montylow, Town Of Mount Royal, Quebec H4P 2L9 Canada Reason it's not correct: David Fhima is not a member of the LLC. Correct Statement: Article IV; Managers/Members The management of the limited liability company is reserved for the members and the name and address of each member of the limited liability company is. 8983208 Canada Inc., 8201 Chemin Montview, Town Of Mount Royal, Quebec H4P 219 Canada ORWas defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: ORThe electronic transmission of the record was defective. David Fhima, President, 8983208 Canada Inc., Member Signaulic of Authorized Representative

Filing Fee: Certified Copy:

\$25.00 \$30.00 (optional)