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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: A-\ DIRECTY INSTALATION 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:
Sharon Glenn Name of Person
A-1 DIRECTY INSTALATION Firm/Company
423 Cottage Cove Court
Orange Park, FL 32073 City/State and Zip Code
Sharonk alenn @ bellsouth net E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Sharo: 6 Glenn at (904) 742-5375 Name of Person at (904) 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:
S25 Filing Fee Certificate of Status S55 Filing Fee & Certificate of Status & Certified Copy Certified Copy S60 Filing Fee, Certified Copy Certified Copy

CR2E062 (2/14)

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. The name of the limited liability company is: A-1 DIRECTY INSTALATION FIRST: The Florida Document number of the limited liability company is: <u>L14</u>00169218 **SECOND:** Document to be corrected is: The name of the Company name THIRD: Electronic Articles of Organization for Florida 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: The name of the LLC Company is misspelled. It should read: INSTALLATION <u>OR</u> 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.

> Filing Fee: Certified Copy:

\$25.00

\$30.00 (optional)

Signature of Authorized Representative