

LI 50000 5314L

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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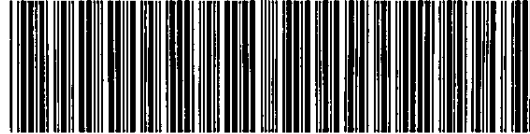
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 MAR 30 AM 7:53

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: AIRCRAFT TURBIN TECHNOLOGIES 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:

A. JOHN ERHARDT

Name of Person

Firm/Company

3780 18TH AVENUE SE

Address

NAPLES, FL 34117

City/State and Zip Code

AJERHARDT@HOTMAIL.COM

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

For further information concerning this matter, please call:

A. JOHN ERHARDT

813

382-5646

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

CR2E062 (2/14)

7

**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: _____
AIRCRAFT TURBIN TECHNOLOGIES LLC

SECOND: The Florida Document number of the limited liability company is: L15000053846

THIRD: Document to be corrected is:
MISSPELLED WORD IN BUSINESS NAME

(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 MISSPELLED. SHOULD BE:

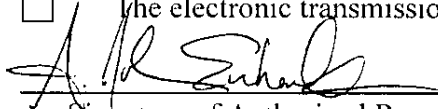
AIRCRAFT TURBINE TECHNOLOGIES LLC

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.


Signature of Authorized Representative

3/27/15
Date

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