L150000 84887

. (Re	equestor's Name)				
(Address)					
(Ad	dress)				
(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					

Office Use Only



11/25/15--01006--007 **25.00



N. Campan But A Com

COVER LETTER

TO: Registration Sec Division of Corr		· ·				
SUBJECT: Dom	inant Golf,	LLC				
	Na	ame of Limited Liabi	lity Company			
Dear Sir or Madain:						
The enclosed Statement of	of Correction and fee(s) are	submitted for filing				
Please return all correspondence	ndence concerning this ma	atter to the following:				
Dale Rehu	IS					
Dominant	Same of Person Golf, LLC					
	Firm/Company					
711 39th 9	3t					
	Address					
Downers Grove, IL 60515						
City/State and Zip Code						
drehus@jumbomax.com E-mail address: (to be used for future annual report notification)						
For further information c	oncerning this matter, plea	ise call:				
Dale Rehu	ıs	₄ ,630	926-4319			
Name o	f Person	Area Code	Daytime Telephone Number			
STREET/COURIER A Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, Florida 3230	ircle		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 (9/15)						

STATEMENT OF CORRECTION

FILED

FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY NOV 25 PH 12: 41

Pursuan <u>FIRST</u> :	t to section 605.0209, F.S., this definite the name of the limited liability	ocument is being submitt company is: Domin	ed to correct a previously filed doc	SECRETARO DE STATO MEDIHASSEE, FLORIDA
SECON	ND: The Florida Document to	number of the limited liab	ility company is: L150000	84887
THIRD: Document to be correct		ted is: Articles of Organization for FL LLC		
	(CHECK THE APPROP	RIATE BOX AND CON	MPLETE THE APPLICABLE ST	<u> </u>
	Contains an incorrect statement. statement are as follows:	The incorrect statement,	the reason the statement is incorre	ct, and the corrected
	Name of Limited Lia	bility Company	was filed for Dominent	Golf, LLC.
	Corrected name of Lin	nited Liability Com	npany should be Domina	nt Golf, LLC.
	OR Was defectively signed. The ma	nner in which the docum	ent was defectively signed and the	appropriate correction are
	The electronic transdission of the Signature of Authoria	muly	Date	6/15
	are of new registered agent, if apping the designation).	licable :(NOTE: if correc	cting the registered agent, the new	registered agent must sign
I hereby provision	ons of all statules relative to the p ions of my position as registered a change in the registered office o	ntered agent and agree to proper and complete perfo agent as provided for in C address, I hereby confirm Registered Ag	act in this capacity. I further agree ormance of my duties, and I am fan Chapter 605, F.S. Or, if this docum that the limited liability company of the compa	niliar with and accept the ent is being filed to merely
		Filing Fee: Certified Copy:	\$25.00 \$30.00 (optional)	