

LIS000146694

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

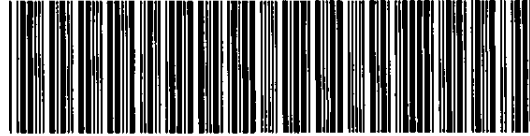
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan SEP - 9 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Glenn Leigh, 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:

John P. Martin
Name of Person

John P. Martin, P.A.
Firm/Company

401 S. Lincoln Ave.
Address

Clearwater, Florida 33756
City/State and Zip Code

jpmlaw@tampabay.rr.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John P. Martin at (727) 467-9470
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: Glenn Leigh, LLC

SECOND: The Florida Document number of the limited liability company is: L15000146694

THIRD: 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:

Name of entity is incorrect. The word "Enterprises" is omitted.

The name of the entity is corrected to read as follows:

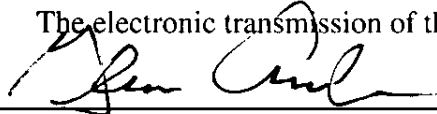
Glenn Leigh Enterprises, LLC

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

9/3/2015

Date

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2015 SEP -8 PM 2:31
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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