

L17000137891

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

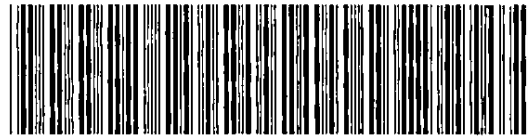
(Business Entity Name)

(Document Number)

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FILED
JUL 10 2017
CLERK OF COURT
CLERK OF COURT

D SCOTT

JUL 10 2017

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: PEGGY & DANIEL MELLEN DREAM VACATIONS LLC.
Name of Limited Liability Company

Dear Sir or Madam,

The enclosed Statement of Correction and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Daniel W. Mellen III

Name of Person

PEGGY & DANIEL MELLEN DREAM VACATIONS LLC.

Firm Company

2320 Mossy Oak Drive

Address

North Port, FL 34287

City, State and Zip Code

DMellen@DreamVacations.com

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

For further information concerning this matter, please call:

Dan Mellen

Name of Person

610

Area Code

952-1857

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: PEGGY & DANIEL MELLEN DREAM VACATIONS LLC.

SECOND: The Florida Document number of the limited liability company is: L17000139891

THIRD: Document to be corrected is: L17000139891 - LLC name change

(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 listed wrong as: "PEGGY & DANIEL MELLEN / DREAM VACATIONS LLC."

Should be: "PEGGY & DANIEL MELLEN DREAM VACATIONS LLC."

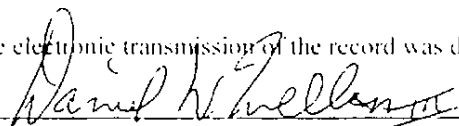
The " / " between MELLEN and DREAM must be removed.

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

6/29/2017

Date

Signature of new registered agent, if applicable (NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation).

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Registered Agent's Signature

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