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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: DELTA HOOD & EXHA	IUST SERVICE
Name of Limited Liab	ility Company
Dear Sir or Madam:	
The enclosed Statement of Correction and fee(s) are submitted for filing	<b>?</b> .
Please return all correspondence concerning this matter to the following	z:
MICHAEL MANELLA Name of Person	-
DELTA HOOD & EXHAUST SERVICE Firm/Company	
1767 Four Mice Cove Parkway #8	24
Cape Coral FL 33990 City/State and Zip Code	
michaelmanella@coméast.net  E-mail address: (to be used for future annual report notification)	 
For further information concerning this matter, please call:	54:
Michael Manella at 973  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 S30 Filing Fee & S55 Filing Fee Certificate of Status Certified Copy	& S60 Filing Fee, Certificate of Status & Certified Copy

CR2E062 (9/15)

## STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	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: Delta Hood & Exhaust Service
SECON	$\frac{1}{2}$
	(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT
험	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:  Please remove Arthur Manella (AP) completely from LLC.  Arthur Manella is not owner or manager of Delta Hood  Exhaust Service. Michael Manella is owner, RA, AP of LLC.  OR
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:
	The electronic transmission of the record was defective.    10/31/17     Signature of Authorized Representative   Date
	re of new registered agent, if applicable :( NOTE: if correcting the registered agent, the new registered agent must signing the designation).
I hereb provisionali provisionali	egistered Agent's Signature, if changing Registered Agent:  y accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the ions of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing shange.  Registered Agent's Signature

Filing Fee:

Certified Copy:

\$25.00

\$30.00 (optional)

CR2E062 (9/15)