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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Kerfluffle Kerfloey, Name of Limited Liab	LLC illity 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:		
Helen T. Cain Name of Person	-	
Firm/Company	-	
20223 SE 141 Place	-	
Hawthorne FL 32640 City/State and Zip Code	-	
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Helm Jeresa (ain at (352) Name of Person at (352) Area Code) 262-8157 Daytime Telephone Number	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is a check for the following amount:		
□\$25 Filing Fee □\$30 Filing Fee & □\$55 Filing Fee & Certificate of Status	S60 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: The Florida Document number of the limited liability company is: L SECOND: THIRD: THE APPROPRIATE BOX AND COMPLETE THE APPLIC × Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: match my license ocation: 15008 S.E. US Huy Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: \underline{OR} The electronic transmission of the record was defective. Signature of new registered agent, it 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. Thereby confirm that the limited liability company has been notified in writing of this change. Registered Agent's Signature

Filing Fee:

Certified Copy:

\$25.00

\$30.00 (optional)