Filing Fee \$50.00 **FOREIGN** LIMITED LIABILITY PARTNERSHIP STATE OF MAINE CERTIFICATE OF CORRECTION Deputy Secretary of State A True Copy When Attested By Signature Deputy Secretary of State (Name of Limited Liability Partnership) Pursuant to 31 MRSA §856, the undersigned, a limited liability partnership organized under the laws of the jurisdiction of _____, and authorized to do business in Maine, executes and delivers for filing this certificate of correction: the Secretary of State filed a document delivered for filing by the undersigned limited liability **FIRST:** partnership entitled: (i.e. Application for Authority to do Business, Assumed Name, etc.) **SECOND:** Said document is an inaccurate record of the action therein referred to, or was defectively or erroneously executed, sealed or acknowledged. THIRD: The inaccuracy or defect to be corrected is described as follows:

FOURTH: The portion of the said document to be corrected is corrected to read in its entirety as follows:

FIFTH:	persons who are substantially and adversely affected by the correction, and as to those persons the corrected document shall be effective from the date this certificate of correction is filed by the Secretary of State.				
DATED					
Partner(s)*					
	(signature)		(type or print name and capacity)		
For Partner(s)	which are Entitie	s			
Name of Entity					
Ву	(authorized signa	ture)	(type or print name and capacity)		
			authorized person (31 MRSA §826.1.B or 2). or the penalties of false swearing under 17-A MRSA §453	3.	
Please remit you	r payment made p	payable to the Maine Secretary of Sta	ute.		
Submit complete	mit completed form to: Secretary of State Division of Corporations, UCC and Commissions 101 State House Station				

Augusta, ME 04333-0101

Telephone Inquiries: (207) 624-7752

Email Inquiries: <u>CEC.Corporations@Maine.gov</u>

Customer Contact Cover Letter

Name of entity(s) on the submitted filings:	
Optional special handling request(s): (check only	/ if applicable)
Hold attested copy for pick up (will be	required to pick up at our office in Augusta, Maine)
24-hour expedited filing (next business	s day) service: \$50 additional filing fee per entity
Immediate expedited filing (same busing	ness day): \$100 additional filing fee per entity
NOTE: Only one expedite fee is required if filing m	nultiple documents for the same entity/charter number at the same time
Payment can be made by check (payable to Main voucher: https://www.maine.gov/sos/cec/forms/cre	
Total fee(s)	enclosed: \$
(Name of contact person)	(Daytime telephone number)
(Contact email address for <u>this</u> filing)	(Email address to use for annual report reminders)
Name and address of person to return the attested	copy of the completed filing:
(Name	e of attested copy recipient)
	(Firm or Company)
	(Mailing Address)
	(City, State & Zip)

NOTE: Failure to provide a contact name and telephone number or email address will result in any erroneous filing(s) being returned to the filer by the Secretary of State's office.

For questions regarding the above filing(s), please call or email our office at (207) 624-7752 or cec.corporations@maine.gov

Submit filings to:

Mailing Address if using USPS
Department of the Secretary of State
Corporations, UCC and Commissions
101 State House Station
Augusta, ME 04333-0101

Mailing Address if using FedEx/UPS
Department of the Secretary of State
Corporations, UCC and Commissions
111 Sewall Street, 4th Floor
Augusta, ME 04330