

**Delaware Division of Corporations  
401 Federal Street – Suite 4  
Dover, DE 19901  
Ph: 302-739-3073**

**Certificate of Correction  
of a Limited Liability Company**

Dear Sir or Madam:

Attached please find a form for a Certificate of Correction of a Limited Liability Company to be filed in accordance with Section 18-211 of the Limited Liability Company Act of the State of Delaware. The fee to file the Certificate is \$220. You will receive a stamped “Filed” copy of the submitted document. A certified copy may be requested for an additional \$50. Expedited services are available. Please contact our office concerning these fees or you may consult our fee chart at [corp.delaware.gov](http://corp.delaware.gov). Checks should be made payable to “Delaware Secretary of State”.

For the convenience of processing your order in a timely manner, please include a cover letter with your name, address and telephone/fax number to enable us to contact you if necessary. Please make sure you thoroughly complete all information requested on this form. It is important that the execution be legible, we request that you print or type the name of the person signing under the signature line.

Thank you for choosing Delaware as your corporate home. Should you require further assistance in this or any other matter, please don’t hesitate to call us at (302) 739-3073.

Sincerely,

Department of State  
Division of Corporations

*Special Instructions – Certificate of Correction of Limited Liability Company*

*This form is to be used as a Template only. The following instructions will help you in correctly completing your Correction Certificate. The instructions will be numbered to correspond with the article it is referencing.*

- 1. The current name of the limited liability company exactly as it appears in our records. Please visit our website to verify the name.*
- 2. List the title of the Certificate being corrected and the date on which the Certificate needing to be corrected was filed with the Delaware Division of Corporations.*
- 3. List the exact inaccuracy or defect that needs to be corrected; must be very specific.*
- 4. List the number of the article that is being amended and set forth exactly how you wish the article to read.*

***Execution Block*** - *The document must be signed by an authorized person of the limited liability company pursuant to Section 18-211 of Title 6. The name of the person must be typed or written legibly underneath the signature.*

*This form contains the basic information required by statute; if you need to add additional information permitted by statute you may draft a new document. Please feel free to call our office at 302-739-3073 for assistance in completing this form or visit our website at [corp.delaware.gov](http://corp.delaware.gov).*

*Sincerely,*

*Delaware Division of Corporations*

STATE OF DELAWARE  
CERTIFICATE OF CORRECTION  
OF A LIMITED LIABILITY COMPANY

The undersigned authorized person, hereby certifies as follows:

1. The name of the limited liability company is \_\_\_\_\_  
\_\_\_\_\_.

2. A Certificate of \_\_\_\_\_  
was filed by the Secretary of State of Delaware on \_\_\_\_\_.  
Said Certificate requires correction as permitted by Section 18-211 of the Limited  
Liability Company Act of the State of Delaware.

3. The inaccuracy or defect of said Certificate is (must give specific reason):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Article \_\_\_\_\_ of the Certificate is corrected to read as follows:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

By: \_\_\_\_\_  
Authorized Person

Name: \_\_\_\_\_  
Print or Type