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FILE ONE ORIGINAL

(Two if you want a filed
stamped copy returned to you)
FEE: \$25.00

**WEST VIRGINIA
ARTICLES OF CORRECTION
FOR LIMITED LIABILITY COMPANY**

Office Hrs: Monday - Friday
8:30 a.m. – 5:00 p.m. ET

**** In accordance with WV Code [§31B-2-207](#), the undersigned organization adopts the following ****
Articles of Correction:

1. The **name of the organization** is: _____

2. Date of filing Articles of Organization
or Certificate of Authority with the WV
Secretary of State: _____

3. Specify and **describe the incorrect statement and reason it is incorrect:**

Correct and **specify how the statement should read:**

4. **Contact name and phone number** to reach in case of a problem with filing: (Optional, however,
listing one may help to avoid a return or rejection of filing if there is a problem with the document.)

Contact Name _____ Phone Number _____

Business **e-mail address**, if any: _____

5. **Signature of person executing document** *(See below [Important Legal Notice Regarding Signature](#)):
Signature: _____ **Title:** _____

***Important Legal Notice Regarding Signature:** Per West Virginia Code [§31B-2-209](#). **Liability for false statement in filed record.** If a record authorized or required to be filed under this chapter contains a false statement, one who suffers loss by reliance on the statement may recover damages for the loss from a person who signed the record or caused another to sign it on the person's behalf and knew the statement to be false at the time the record was signed.