

10/25/2017 12:32

5612968438

PAGE 01/02

https://efile.sunbiz.org/scripts/efilecovr.exe

Division of Corporations

L100000024674

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000281438 3)))



H170002814383ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850)617-6383

From: Account Name : CORPORATE CREATIONS INTERNATIONAL INC  
Account Number : 110432003053  
Phone : (561)694-8107  
Fax Number : (561)694-1639

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
ELEPHANT PUBLISHING, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

2017 OCT 25 PM 1:41

17 OCT 25 AM 8:49

Electronic Filing Menu

Corporate Filing Menu

Help

OCT 26 2017

Y SULKER

10/25/17, 1:07 PM

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. ELEPHANT PUBLISHING, LLC

FIRST: The name of the limited liability company is: \_\_\_\_\_

SECOND: The Florida Document number of the limited liability company is: L10000024674 2013 Annual Report filed 02/26/2013

THIRD: Document to be corrected is: \_\_\_\_\_

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

[X] Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: Daniel Eilemberg was listed as Managing Member, which was inaccurate. Summit Press, LLC, was the Managing Member with an address of 311 Lincoln Rd, Suite 202, Miami Beach, FL 33139.

OR

[ ] Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

OR

[ ] The electronic transmission of the record was defective. [Signature] Date

Signature of new registered agent, if 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, I hereby confirm that the limited liability company has been notified in writing of this change.

Registered Agent's Signature

Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)