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DAWSON LAW FIRM, P.C. PRACTICAL LEGAL SOLUTIONS FOR BUSINESS

1844 Penfield Road Penfield, New York 14526

WWW.DLFPC.COM

Fax: (585) 348-9052 Phone: (585) 381-8240

July 11, 2016

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Re: 1116 Castle Pines CT., LLC Statement of Correction

Dear Sir of Madam:

On behalf of our client 1116 Castle Pines CT., LLC, please find enclosed the cover letter, statement of correction, and the \$55.00 filing fee and certified copy request.

Please acknowledge your receipt of this letter and the enclosure by date-stamping the enclosed copy of this letter and returning it to the office in the enclosed return envelope.

If you have any questions, please feel free to call the office.

Respectfully,

Isabella Mitrevski

Enc.

COVER LETTER

	TO: Registration Section Division of Corporations					
SUBJECT: 1116 Castle Pines CT., LLC						
30202011		N	ame of Limited Liabil	lity Company		
Dear Sir or N	⁄ladam:					
The enclosed Statement of Correction and fee(s) are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Brett	Daws	on				
Name of Person						
Daws	on La	w Firm, P.C	· .			
		Firm/Company				
1844 Penfield Road						
Address						
Penfield, NY 14526						
City/State and Zip Code						
BDawson@dlfpc.com						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Brett Dawson 3, 585		_{at} 585	381-8240			
	Name o	f Person	Area Code	Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		 	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following amount:						
\$25 Filin	g Fee	\$30 Filing Fee & Certificate of Status	■ \$55 Filing Fee & Certified Copy	& S60 Filing Fee, Certificate of Status & Certified Copy		
CR2E062 (9	/15)					

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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: 1116 Castle Pines CT., LLC The Florida Document number of the limited liability company is: <u>L15000108353</u> SECOND: Document to be corrected is: Articles of Organization THIRD: (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT х Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: Principal address, Authorized person address and mailing address. Incorrect due to a misspelling. Correct address is 24 Rollins Crossing, Pittsford, NY 14543 <u>OR</u> \Box Was defectively signed. The manner in which the document was defectively signed and the appropriate correction a as follows: <u>OR</u> The electronic transmission of the record was defective. Signature of Authorized Representative 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:

Certified Copy:

\$25.00

\$30.00 (optional)

CR2E062 (9/15)