## 1900034772

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T. CLINE
OCT 29
EXAMINER

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallhassee. Ft. 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195		
REFERENCE : 020984 8785A		
AUTHORIZATION :		
COST LIMIT : \$25.00		
OPDED DATE . Octobor 23 2010		
ORDER DATE: October 23, 2019		
ORDER TIME : 9:36 AM		
ORDER NO. : 020984-005		
CUSTOMER NO: 8785A		2019
		13 OCT
DOMESTIC AMENDMENT FILING	7	T 28
		PM 12: 09
NAME: HARBOR IRB, LLC	2000 2000 2000	90
EFFECTIVE DATE:		
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION		
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:		
CERTIFIED COPY		
XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING		
CONTACT PERSON: Kadesha Roberson EXT# 62980		

EXAMINER'S INITIALS:

## **COVER LETTER**

TO: Registration Division of C						
SUBJECT: HAF	RBOR IRB, L	LC.				
SUBJECT:		 Name of Limited Liabili	ty Company	_		
Dear Sir or Madam:						
The enclosed Stateme	nt of Correction and fee(s)	are submitted for filing.				
Please return all corres	spondence concerning this	matter to the following:				
	Name of Person					
Corporation	on Service C	ompany				
·	Firm/Company					
1201 Hays	s Street			. ,	27	
	Address				<b>70119</b> OCT 2	
Tallahass	e FL			351 373 373 373 373	7.2	****
	City/State and Zip Code				<del>-1</del>	i Tr
complianc	email@cscg	ılobal.com		190 Ja 13 Ki	2	C
•	to be used for future annua	<i>'</i>		24 77	P#12: 09	
For further information	n concerning this matter, pl	ease call:				
Nam	e of Person	at () _ Area Code	Daytime Telephone Number	_		
STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, Florida 32	ons · Circle	Re Di P.	AILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 allahassee, Florida 32314			
Enclosed is a check for	or the following amount:					
S25 Filing Fee	S30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	S60 Filing Fee. Certificate of Status & Certified Copy			
CR2E062 (9/15)						

## STATEMENT OF CORRECTION FOR FLORIDA OR FORFICN LIMITED LIABILITY COMPANY

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: HARBOR IRB, LLC The Florida Document number of the limited liability company is: L19000234772 SECOND: Document to be corrected is: Statement of Correction THIRD: (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT  $\Box$ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: Stephen Ballas, Manager listed at an incorrect address: 675 VRW Pkwy Unit 195 Chestnut Hill MA 02467 The address should be corrected to read: 675 VFW Pkwy Unit 195 Chestnut Hill MA 02467 Cara Ballas listed as a manager should be deleted from the record.  $\underline{\mathbf{OR}}$ Was defectively signed. The manner in which the document was defectively signed and the appropriate exprection are as follows: П as follows: <u>OR</u> П The electronic transmission of the record was defective. Stephen Ballas 10/22/2019 Signature of Authorized Representative 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

\$25.00

\$30.00 (optional)

Filing Fee:

Certified Copy:

CR2E062 (9/15)