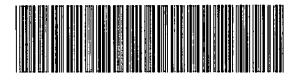
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(F	Requestor's Name)	
(F	Address)	
(<i>f</i>	Address)	
(0	City/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(E	Business Entity Name)	
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions t	o Filing Officer:	

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MINGRIKER JAN 0 4 2022



December 7, 2021

ORGANIC BEACH RETREAT LLC 2837 S ATLANTIC AVE DAYTONA BEACH SHORES, FL 3118

SUBJECT: ORGANIC BEACH RETREAT LLC

Ref. Number: L21000467445

We have received your document for ORGANIC BEACH RETREAT LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 021A00029431

Yasemin Y Sulker Regulatory Specialist III

www.sunbiz.org

COVER LETTER

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	tion Section r of Corporations	40			
SUBJECT:	ORGANIC BE	AOH REZ Name of Limited Liab	REAT ility Company		
Dear Sir or Mada	ını:				
The enclosed Star	tement of Correction and fee(s) a	are submitted for filing	<u>.</u>		
Please return all o	correspondence concerning this i	natter to the following	3:		
JOHN	DANIS Name of Person		-		
OKFAVIC	BACH RET	pesat	-		
2009 5	S ATLANTIC AVE Address	2	-		
_0AY701	A BACH SHOW City/State and Zip Code	PES, FL 3	2118		
OPGANU E-mail addr	ress: (lo be used for future annua	(WG/MA11.) Freport notification)	COM		
For further inform	nation concerning this matter, pl	ease call:			
KATE	Name of Person	at (947 Area Code) 553-6683 Daytime Telephone Number		
Registr Divisio P.O. B	Address: ration Section on of Corporations ox 6327 assee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Su Tallahassee, FL 32303	iite 810	
Enclosed is a che	eck for the following amount:				
□\$25 Filing Fee	☐ \$30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy	CHECK	POID

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: ORGAULC BRACH RETREAT					
SECON THIRD	in a class of and a class of					
	(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT					
	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:					
-	INCORPORT: BRIKER IV. THE NAME AND HODRESS OF PERSONS AUTHORIZED TO MAKINGE LIC					
	CORRECT: AMBR - NSB VACATION HOMES, LLC					
	ADDRESS: 725 DILVICANTON AVE, SINTE 291109, JORT CRANGT, FE32724					
	OR CONTRACTOR OF THE PROPERTY					
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:					
П	OR The electronic transmission of the record was defective.					
	Signature of Authorized Representative 12/23/202/ Date Date					
_	re of new registered agent, if applicable: (NOTE: if correcting the registered agent, the new registered agent must sign agent the designation).					
Thereby provisio obligati	gistered Agent's Signature, if changing Registered Agent: accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the as of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the ons of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely change in the registered office address, I hereby confirm that the limited liability company has been notified in writing hange.					
Registered Agent's Signature						
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)					