

L22000526542

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

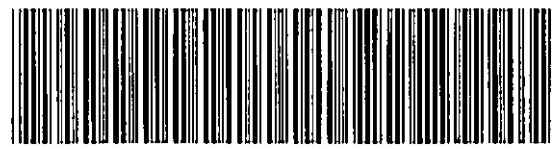
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

MAR 29 2023
J. HORNE

Office Use Only



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01/23/23--01020--022 **30.00

2023 JAN 23 10:10:56
REGISTRATION
FILED
MAR 29 2023
J. HORNE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HE(A)RT GALLERY MIAMI LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ROY RECANATI

Name of Person

HEART GALLERY MIAMI LLC

Firm/Company

919 COLLINS AVE.

Address

MIAMI BEACH, FL 33139

City/State and Zip Code

RECANATIROY@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ROY RECANATI

305

833-3222

at (_____)

Name of Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check 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

**STATEMENT OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

2023 JAN 23 AM 10:57
SECRETARY OF STATE
FLORIDA

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: HE(A)RT GALLERY MIAMI LLC

SECOND: The Florida Document number of the limited liability company is: L22000526542

THIRD: Document to be corrected is: CORRECTION OF NAME TO LIABILITY COMPANY

(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:

NEED TO REMOVE PARENTHESIS FROM NAME. FROM HE(A)RT GALLERY MIAMI LLC. TO HEART
GALLERY MIAMI LLC

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.

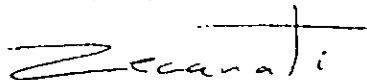
Signature of Authorized Representative

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

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