## L23000 240707

(Requestor's Name)						
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## COVER LETTER

TO: Registratio	on Section f Corporations					
	ER DUDES FL LLC					
SUBJECT:	ì	Name of Limited Liab	ility Company			
Dear Sir or Madam:	:					
The enclosed States	nent of Correction and fee(s) a	re submitted for filin	g.			
Please return all cor	rrespondence concerning this r	natter to the following	g:			
Michael Nathanson	1					
	Name of Person		_			
PAVER DUDES F	L LLC					
<del></del>	Firm/Company		_			
5901 PINEBROOK	CDR			4.11	202:	
	Address		-	- ; -	3 10	, i
BOCA RATON, FI	L 33433				123 HOY 21	:
	City/State and Zip Code		-	: , ~ ( : , ~ (	Ē	- - -
michael@PaverDuc	desFlorida.com			127	Ģ	دوده ال <sub>احدا</sub>
E-mail addres	s: (to be used for future annua	report notification)	-	111	ဒ္ဓဗ	
For further informa	tion concerning this matter, pl	case call:				
Michael Nathanson	1	561	948-1592			
N	lame of Person	at ( Area Code	Daytime Telephone Number			
Division P.O. Box	tion Section of Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	)		
Enclosed is a check	k 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			

CR2E062 (9/15)

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

Pursuan	it to se	ction 605.0209, F.S., this document is being submitted	I to correct a previously filed document.	
rido eve	The	ame of the limited liability company is:	ES FL LLC	300 事
FIRST	i ne n	ame of the finited habitity company is.		1
				ين جب
SECO	ND:	The Florida Document number of the limited liabi	lity company is: L23000240707	
THIRE	2:	Document to be corrected is: Detail by Entity Name		
		(CHECK THE APPROPRIATE BOX AND COM	DI ETETHE ADDITO ADITE CUATES	MENT
		CHECK THE ATTROTRIATE BOX AND COM	I DE LE THE ACT ELCABING STATES	71351 X I
		nins an incorrect statement. The incorrect statement, to nent are as follows:	he reason the statement is incorrect, and	the corrected
	NAT	HONSON, MICHAEL, data entry error, correct spelling	NATHANSON, MICHAEL	
	NAT	HONSON, DANIEL, data entry error, correct spelling N	ATHANSON, DANIEL	
	<u>OR</u>			
	Was	defectively signed. The manner in which the docume	nt was defectively signed and the approp	riate correction are
		llows:		
				<del></del>
	•			
	<u>OR</u>			
	The e	electronic transmission of the record was defective.	/ /	
		17/	11/16/21	
		Signature of Authorized Representative	Date	
			2.110	
		new registered agent, if applicable :( NOTE: if correct designation).	ing the registered agent, the new register	ed agent must sign
New R	eaister	ed Agent's Signature, if changing Registered Agent:		
1 hereb	v acce	pt the appointment as registered agent and agree to a	ct in this capacity. I further agree to con	iply with the
obligat reflect	ions oj a chan	all statutes relative to the proper and complete perfor I my position as registered agent as provided for in Ci ge in the registered office address, I hereby confirm t	napter 605, F.S. Or, if this document is b	eing filed to merely
of this	mange	<b>.</b> .		
		Registered Age	nt's Signature	
		-		
		Filing Fee: Certified Copy:	\$25.00 \$30.00 (optional)	