

2/19/24, 3:38 PM

Division of Corporations

# M07000001147

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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AERO MIAMI III, LLC

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K. SALY

FEB 20 2024

**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: Aero Miami III, LLC

**SECOND:** The Florida Document number of the limited liability company is: M0700001147

**THIRD:** Document to be corrected is: Notice of Withdrawal of Certificate of Authority

**(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:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**OR**

- ☒ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Incorrect signature indicated: /s/ Aaron M. Sachs Aaron M. Sachs

Correct signature to be indicated: /s/ Aaron M. Sachs Aaron M. Sachs

**OR**

- ☐ The electronic transmission of the record was defective.

/s/ Aaron M. Sachs

2/19/2024

\_\_\_\_\_  
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  
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**FILED**  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA