## M23000012528

(R	(equestor's Name)	
(A	(ddress)	
(Д	(ddress)	
(C	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(B	Business Entity Name)	
([	Ocument Number)	<del></del>
Certified Copies	Certificates o	of Status
Special Instructions to Fi	ling Officer:	
-		

Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : 12000000195		
REFERENCE : 982602 8253665		
AUTHORIZATION: Just Clarge		
COST LIMIT : \$25.00		
ORDER DATE: September 12, 2023		
ORDER TIME : 2:48 PM		
ORDER NO. : 982602-250		
CUSTOMER NO: 8253665		
FOREIGN FILINGS  NAME: WSB LLC		
CORPORATE LIMITED PARTNERSHIP XX LIMITED LIABILITY COMPANY		
XXXX AMENDMENT		
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:		
CERTIFIED COPY  XX PLAIN STAMPED COPY  CERTIFICATE OF GOOD STANDING		
CONTACT PERSON: Eyliena Baker EXT#		

EXAMINER:

## 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. <u>FIRST</u>: The name of the limited liability company is: \_\_\_\_ The Florida Document number of the limited liability company is: M23000012528 SECOND: Document to be corrected is: \_\_\_\_\_ THIRD: (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: WSB Engineering Holdings Inc is listed as manager, however WSB Engineering Holdings Inc is the member of WSB LLC. <u>OR</u> Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: <u>OR</u> The electronic transmission of the record was defective. 11/05/2023 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)