Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000107885 3)))

H18000107885 3ABC5

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : SNYDER & SNYDER, P.A.
Account Number : I20160000107
Phone : (954)475-1139
Fax Number : (954)475-2634

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: corp@snyderlawpa.com

FILED
2018 APR -5 A 11:38

RECEIVED
2018 APR -5 AM 11:30
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ASTORIA SLS, LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	$60.00

Electronic Filing Menu Corporate Filing Menu Help

COVER LETTER

(((H18000107885 3)))

TO: Registration Section
Division of Corporations

SUBJECT: ASTORIA SLS, 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:

Olga I. Galanter, Esq.
Name of Person

Snyder & Snyder, P.A.
Firm/Company

7931 Orange Drive
Address

Davie, Florida 33328
City/State and Zip Code

corp@snyderlawpa.com
E-mail address: (to be used for future annual report notification)

FILED
2018 APR -5 A 11:30

For further information concerning this matter, please call:

Olga I. Galanter, Esq. at (954) 475-1139
Name of Person Area Code Daytime Telephone Number

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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

CR2E062 (9/15)

(((H18000107885 3)))

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(((H18000107885 3)))

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: ASTORIA SLS, LLC

SECOND: The Florida Document number of the limited liability company is: L18000079120

THIRD: Document to be corrected is: Articles of Organization

(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:

Please see attached Exhibit "A".

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.

FILED
2018 APR 05 A 11:53

Signature of Authorized Representative — Date: 4/5/18

Olga I. Galanter, Esq., authorized rep. for Olga Mirer, Manager

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)

(((H18000107885 3)))

Exhibit "A" (((H18000107885 3)))
to Statement of Correction for
ASTORIA SLS, LLC
Document No.: L18000079120

Incorrect statement: The Articles of Organization reflect the name of the Company as ***ASTORIA SLS, LLC.***

Reason: The Articles of Organization should not reflect ***ASTORIA SLS, LLC*** as the name of the Company.

Correct statement: The Articles of Organization should reflect the name of the Company as ***ASTORIA OMS, LLC.***

FILED
2018 APR -5 A 11:38

(((H18000107885 3)))