

A020000000653

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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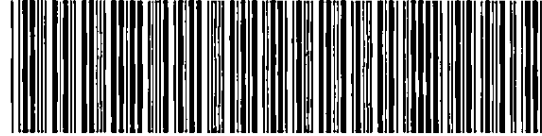
(Business Entity Name)

(Document Number)

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2022 OCT -7 PM 12:14

SECRETARY OF STATE
FALL ARIZONA, AZ

OCT 10 2022

2022 OCT 10

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

WIDEL LIMITED

Insert name currently on file with Florida Department of State

A02000000653

Florida Document Number of Limited Partnership or Limited Liability Limited Partnership

Pursuant to the provisions of section 620.1207, Florida Statutes, this limited partnership or limited liability limited partnership submits the following statement of correction.

FIRST: The reason for filing this statement of correction is:

- ☒ The record contained false or erroneous information.
☐ The record was defectively signed.

SECOND: This statement corrects Certificate of Amendment to Certificate of Limited Partnership

Specify document type being corrected

filed with the Florida Department of State on 8/22/2022

Insert date document filed with Dept. of State

THIRD: The false or erroneous information or defect is as follows:

The filed document amended the General Partner to add:

Fran Gordon: 10398 NW 63rd Drive, Parkland, FL 33076 and

Ilyse Horwitz: 6521 NW 103rd Lane, Pompano Beach, FL 33076.

FOURTH: The false or erroneous information or defect is corrected as follows:

The defective information is corrected by removing the following individuals as General Partners:

Fran Gordon: 10398 NW 63rd Drive, Parkland, FL 33076 and

Ilyse Horwitz: 6521 NW 103rd Lane, Pompano Beach, FL 33076.

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FLORIDA DEPARTMENT OF STATE

Signature of a general partner*:

(*Note: If adding or deleting an election to be a limited liability limited partnership statement, all general partners must sign. If adding additional general partner(s), the new general partner(s) must sign).

Erin Saville Erin Saville, Special Secretary for: WIDEL GENERAL, INC. - General Partner for WIDEL LIMITED

Signature(s) of new general partner(s), if any:

Signature of new registered agent, if applicable : (NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation below)

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.

Signature of Registered Agent

| | |
|-----------------------------------|---------|
| Filing Fee: | \$52.50 |
| Certified Copy (optional): | \$52.50 |
| Certificate of Status (optional): | \$8.75 |