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ALLAHASSEE, FLORID:

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## COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: JAD Gwinnup Kids, LTD  Name of Limited Partnership or Limited Liability Limited Partnership
The enclosed Statement of Correction and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
Debby Lovett  Contact Person  Ja D Gwinnupkids LTD  Firm/Company  123 Morgate Cv.  Address  Royal Palm Beach FL 33411  City, State and Zip Code  Westside @ Westside repro. com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:    Dog Love H   at (Sal) 843-0404     Name of Contact Person   Area Code and Daytime Telephone Number
Enclosed is a check for the following amount:
■ \$52.50 Filing Fee and Certificate of Status ■ \$105.00 Filing Fee Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle  MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Tallahassee, FL 32301

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

2018 MAR 12 PM 2: 31

J&D Gwinnupkids LTD Insert name currently on file with Florida Department of State	TATE ORIO/	2: 3
Insert name currently on file with Florida Department of State		
A0400000757		
Florida Document Number of Limited Partnership or Limited Liability Limited Partnershi	p	
Pursuant to the provisions of section 620.1207, Florida Statutes, this limited partners 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  Ceetificate of Limi Specify document type being corrected  MAY 6 2004  Insert date document filed with Dept. of State	tecl	Partnersh
THIRD: The false or erroneous information or defect is as follows:		
We filed with the name IID GWINN (with two (N's) in Gwinnup. The state filed with one (N) Gwinup. The Annual reports with one N.	ti.	•
FOURTH: The false or erroneous information or defect is corrected as follows:  Since All TRY recurds & LOANS Are follows:  With ONE (N) vic need it filed  WITH ONE N.		
SO FILE AS : JAD GWINUPKID	5, 1	_TB

this will then match with all Legal Docs

Signature of a general partner*:  (*Note: If adding or deleting an election to be a lim partners must sign. If adding additional general partners must sign.	
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Signature(s) of <u>new</u> general partner(s), if an	TARY OF ASSEE, F
	STATI DRIII
Signature of new registered agent, if applicable: (registered agent must sign accepting the designation of the appointment as registered agent to comply with the provisions of all statutes relationally and I am familiar with and accept the obligious.	on below) ent and agree to act in this capacity. I further agree we to the proper and complete performance of my
Signature of Reg	gistered Agent

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\$52.50 \$52.50 \$8.75

Filing Fee: Certified Copy (optional): Certificate of Status (optional):