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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JAN 04 2016
J SHIVERS

HFDF HOLDING CO., LTD.

9400 River Crossing Blvd., Suite 102
New Port Richey, FL 34655
(727) 376-6831 ▲ Fax (727) 376-5973

December 24, 2015

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

SUBJECT: Corrective Amendment to Limited Partnership
Effective Date

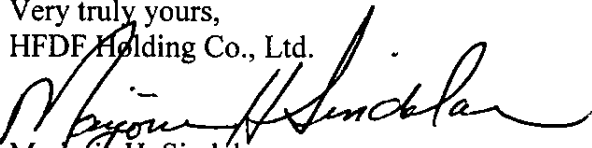
To Whom it May Concern:

Enclosed is the "Cover Letter" and Statement of Correction for Florida Limited Partnership of HFDF Holding Co., Ltd. Also enclosed is check # 1736 in the amount of \$105.00 for filing.

Please review, file and email a copy back to: Alex@deebcompanies.net. Should you have any questions you may contact the undersigned at 727-376-6831 ext. 102.

Thanking you in advance for your cooperation.

Very truly yours,
HFDF Holding Co., Ltd.


Marjorie H. Sindelar
Assistant to Alex R. Deeb

hfdfltr

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HFDF Holding Co., 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:

Marjorie Sindelar

Contact Person

HFDF Holding Co., Ltd.

Firm/Company

9400 River Crossing Blvd., Suite 102

Address

New Port Richey, FL 34655

City, State and Zip Code

Alex@deebcompanies.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Marjorie Sindelar at (727) 376-6831 xt 102

Name of Contact Person

Area Code and Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$52.50 Filing Fee

☐ \$61.25 Filing Fee
and Certificate of
Status

☐ \$105.00 Filing Fee
and Certified Copy

☐ \$113.75 Filing Fee,
Certified Copy, and
Certificate of Status

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

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

HFDF Holding Co., Ltd.

Insert name currently on file with Florida Department of State

A05000000813

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 of HFDF Holding Co., Ltd.

Specify document type being corrected

filed with the Florida Department of State on December 17, 2015

Insert date document filed with Dept. of State

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

The document omitted the Effective Date.

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TALLAHASSEE, FLORIDA

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

The Effective Date in Section F. should have read as follows:

"Effective date, if other than the date of filing: December 31, 2015"

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).

Old:

JHDF, Inc

[Signature]

Alex R Deeb, President

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

New:

TASU Inc

[Signature]

Alex R Deeb, President

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

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15 DEC 30 PM 12:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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