

D24000000039

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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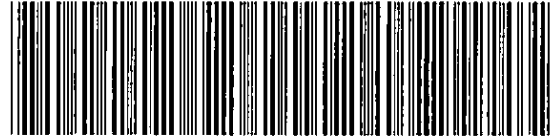
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NG-70 Trust
Name of Corporation

DOCUMENT NUMBER: D2400000039

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Steve Geci

Name of Contact Person

Firm/Company

2950 N 12th Avenue

Address

Pensacola, FL 32503

City/State and Zip Code

stevegeci@geciengineering.com

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

For further information concerning this matter, please call:

Steve Geci

at (850) 432-2929
Area Code Daytime Telephone Number

Name of Contact Person

Enclosed is a check for the following amount:

- | | |
|--|---|
| <input type="checkbox"/> \$35.00 Filing Fee | <input checked="" type="checkbox"/> \$43.75 Filing Fee & Certificate of Status |
| <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$52.50 Filing Fee, Certificate of Status & Certified Copy |

Mailing Address:

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

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF CORRECTION

For

NG-70 Trust

Name of Corporation as currently filed with the Florida Dept. of State

D2400000039

Document Number (if known)

Pursuant to the provisions of Section 607.0124, Florida Statutes.

These articles of correction correct the AFFIDAVIT TO THE FLORIDA SECRETARY OF STATE
(Document Type Being Corrected)

filed with the Department of State on 7/12/2024
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:


The name of NG-70 Trust on the affidavit was incorrect.

The correct name is NG-79 Trust.

Correct the inaccuracy, incorrect statement, or defect:

A new Affidavit is enclosed with the correct name of NG-79 Trust.

A highlighted copy of the original Affidavit and Declaration of Trust is also enclosed.



(Signature of a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Steve Geci

(Typed or printed name of person signing)

SETTLOR / Registered Agent

(Title of person signing)

Filing Fee: \$35.00

**AFFIDAVIT TO THE FLORIDA SECRETARY OF STATE
TO FILE OR QUALIFY**

NG-79 Trust

A Florida **TRUST**

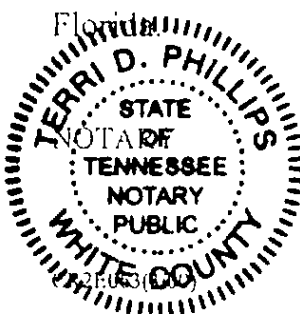
In accordance with Section 609.02 of the Florida Statutes, pertaining to
Common Law Declarations of Trust, the undersigned, the Chairman of the
Board of Trustees of NG-79 Trust, a

Florida (Name of Trust)
Trust hereby affirms in order to file or qualify
(State)
NG-79 Trust in the State of Florida.
(Name of Trust)

1. Two or more persons are named in the Trust.
2. The principal address is 1671 Doran Rd.
Sparta, TN 38583
3. The registered agent and street address in the State of Florida is:
Steve A. Geci
2950 N. 12th Avenue Pensacola, FL 32503
4. Acceptance by the registered agent: Having been named as registered
agent to accept service of process for the above named Declaration of Trust
at the place designated in this affidavit, I hereby accept the appointment as
registered agent and agree to act in this capacity.

(Signature of Registered Agent)

5. I certify that the attached is a true and correct copy of the Declaration of
Trust under which the association proposes to conduct its business in



Name: Neil A. Geci
Chairman of the Board of Trustees

Filing Fee: \$350.00
Certified Copy: \$ 8.75 (optional)

STATE OF TENNESSEE

COUNTY OF WHITE

BE IT REMEMBERED, that on this 18th day of July 2024, before me, the subscriber, a Notary Public in and for the said County and State personally came Neil A Geci as Agent in the foregoing trust agreement and acknowledged the signing thereof to be his voluntary act and deed, () are personally known to me or () have provided valid driver's licenses as identification.

IN TESTIMONY WHEREOF, I have hereunto subscribed my name and affixed my notarial seal on the day and year last aforesaid.

My Commission Expires: May 19 2027

June P. Peltier
Notary