

L01000005235

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

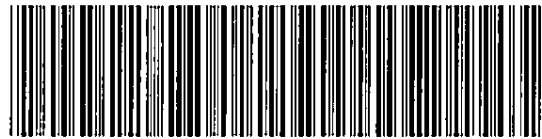
(Business Entity Name)

(Document Number)

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Account#: 120000000088

Date: 9/18/2017

Name: KENDALL HOWELL

Reference #: T012092

Entity Name: AZORRA AIRPORT HOLDINGS LLC

☐ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☒ Other

ISSUES - CALL KEN @  
518-213-0738

**\*\* CORRECTION STATEMENT \*\***

Authorized Amount: \$25.00

Signature: \_\_\_\_\_

STATEMENT OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

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: Azorra Airport Holdings LLC

SECOND: The Florida Document number of the limited liability company is: L01000005235

THIRD: Document to be corrected is: Amended and Restated 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:

There is an error in the address of the registered agent. The corrected address is as follows: The street address of the Company's registered office is 240 Southwest 34th Street, Fort Lauderdale, Florida 33315.

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.

*Robert M. Muscare* 9/18/17  
Signature of Authorized Representative Date

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)

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