

LO5000084588

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

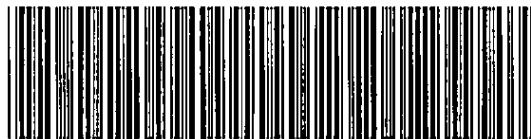
(Document Number)

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300386855713

2022 MAY 11 11:38
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APPROVED
AND
FILED

300386855713
05/03/22--01027--002 **302.50

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bay Cut Properties LLC, a Florida Limited Liability Company

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Olga De Los Santos, Esq.

Name of Person

Fortune International

Firm/Company

1300 Brickell Ave

Address

Miami, Florida 33131

City/State and Zip Code

olga@fortuneintlgroup.com

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

For further information concerning this matter, please call:

Olga De Los Santos, Esq.

305

3511000

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Mailing Address:

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

Street Address:

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

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|--|
| ☐ \$25 Filing Fee | ☐ \$30 Filing Fee &
Certificate of Status | ☐ \$55 Filing Fee &
Certified Copy | ☐ \$60 Filing Fee,
Certificate of Status &
Certified Copy |
|--|---|--|--|

**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: Bay Cut Properties LLC, a Florida limited liability company

SECOND: The Florida Document number of the limited liability company is: L05000084588

THIRD: Document to be corrected is: Articles of Dissolution, Filed January 14, 2021

(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:

Incorrect Statement: Bay Cut Properties LLC was voluntarily dissolved.

Reason: The statement above is incorrect because Bay Cut Properties LLC was erroneously dissolved.

Corrected Statement: Articles of Dissolution were erroneously filed and Bay Cut Properties LLC remains active.

OR



Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

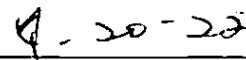
OR



The electronic transmission of the record was defective.



Signature of Authorized Representative



Date

FILED
MAY 2 2022
STATE
OF FLORIDA
CLERK OF THE
SOLICITOR GENERAL'S
OFFICE

2022 MAY -2 AM 11:38

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AND
FILED

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)