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COVER LETTER

TO: Registration Division of 0					
SUBJECT: MSME	O Investments, LLC				
		f Limited Liability Cor	mpany)		
Dear Sir or Madam:					
The enclosed Articles	s of Correction and fee(s) a	re submitted for filing.			
Please return all corre	espondence concerning this	matter to the following	g:		
Molsey A Edwa	rds				
	(Name of Person)		_		
MSMD Investmen	nts, LLC				
	(Firm/Company)		_		
2477 Alaqua Drive	e				
	(Address)		_		
Longwood, Florid	a 32779		_		
	(City/State and Zip Code)	-	_		ا <u>ت</u> ر
For further information	on concerning this matter, p	olease call:			
Jack E Owens		at (407	_)_293-2654 ext. 101		ن انآ
(Na	me of Person)	(Area Code &	& Daytime Telephone Numb	er)	4.5
STREET/COURIES Registration Section Division of Corporati Clifton Building 2661 Executive Cente Tallahassee, Florida	ions er Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 323	s	02
Enclosed is a check	for the following amount:	:			
☑ \$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	S60 Filing Fee, Certificate of Status Certified Copy	; &	

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted <u>within the required 30</u> <u>business days</u> to correct the <u>attached</u> articles of organization or application to transact business in Florida.

<u>FIRST</u>	The name of the limited liability company is: MSMD Investments, LLC		
SECO	ND: The articles of organization or the application to transact business		
<u>(CH</u>	ECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE ST	<u>`AT</u>	EMENT
7	Contains an incorrect statement. The incorrect statement, the reason the statement, and the corrected statement are as follows:	tem	ent is
	The company name was incorrectly entered on the articles of organization as MSMD I	nve	stment, LLC
	and should have been entered as MSMD investments, LLC.		
	<u>OR</u>		
	Was defectively signed. The manner in which the document was defectivel the appropriate correction are as follows:	<u>y</u> si	igned and
			1 49
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Dated:	November 11 Signature of a member or authorized representative of a member		
	Molsey A Edwards, Managing Member Typed or printed name of signee		
	Filing Fee: \$25.00		

Certified Copy:

\$30.00 (optional)