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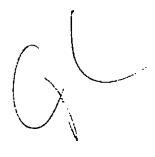
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COVER LETTER

TO: Registration Section Division of Corporations Les Abstein Builders LLC SUBJECT: 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: Leslie Abstein, Jr. Name of Person Les Abstein Builders LLC Firm/Company 221 Live Oak Lane Address Havana, Fl. 32333 City/State and Zip Code isnf@mchsi.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Leslie Abstein, Jr. Daytime Telephone Number Name of Person Area Code Street Address: Mailing Address: Registration Section Registration Section **Division of Corporations Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Enclosed is a check for the following amount: **■**\$25 Filing Fee ☐ \$30 Filing Fee & □\$55 Filing Fee & ☐ \$60 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy

CR2E062 (9/15)

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:_____ The Florida Document number of the limited liability company is: ___ L 0.5000 /1980 9 SECOND: Document to be corrected is: L 05000/19809 Articles of 019917-4 fire THIRD: (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT Ø Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: OR Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: Signed as: Les Abstein, Jr. Correction is legal name: Leslie C. Abstein, Jr. OR \Box The electronic transmission of the record was defective. April 25, 2023 ignature 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

Registered Agent's Signature

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

Filing Fee: Certified Copy:

of this change.

\$25.00

\$30.00 (optional)