

L0600000092342

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:
Authorized By
Bill Paul
Acct 110727003105

Office Use Only



300428283653

2024 DEC 13 PM 4:17
Filing Office

DEC 19
S. PRATHER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SMP59, LLC
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:

WILLIAM R. PAUL

Name of Person

MECHANIK NUCCIO HEARNE & WESTER, P.A.

Firm/Company

305 SOUTH BOULEVARD

Address

TAMPA, FLORIDA 33606

City/State and Zip Code

WRP@FLORIDALANDLAW.COM

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

For further information concerning this matter, please call:

WILLIAM R. PAUL

813

240-8099

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: SMP59, LLC

SECOND: The Florida Document number of the limited liability company is: L06000092342

THIRD: Document to be corrected is: Annual Reports

(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:

All Annual Reports filed for SMP59, LLC incorrectly listed the Manager and the Authorized Person signing such

Annual Reports as STEPHEN M. PETTT. That was a misspelling of both his first name and his last name.

The correct spelling of the name of such Manager and such Authorized Person is STEPHAN M. PETTTT.

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.

Stephan M. Pettitt 12/19/24
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.

Stephan M. Pettitt
Registered Agent's Signature

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)