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SECRETARY OF STATE
TALLAHASSEE, FLORIO

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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: ALFA 2104 LLC	·			
(Name of Limited Liability Co	mpany)			
Dear Sir or Madam:				
The enclosed Articles of Correction and fee(s) are submitted for filing				
Please return all correspondence concerning this matter to the following	****			
Evelina V. VASSILEV (Name of Person)	2001 NOV 19 P 4: 22 SECRETARY OF STATE ALLAHASSEE, FLORIDA			
(Firm/Company)	- LCOL			
2034 Tanglewood DR NE	22 RIDA			
ST. PETERSBURG FL 33 (City/State and Zip Code)	702			
For further information concerning this matter, please call:				
Evelina V. VASSILEV at (Area Code of Area Co	481-9616 & Daytime Telephone Number)			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following amount:				
325 Filing Fee \$30 Filing Fee & Certificate of Status Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy			

CR2E062 (08/05)

ARTICLES OF CORRECTION **FOR** FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

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

in Florida.	
FIRST:	The name of the limited liability company is: ALFA 2104 LLC
SECOND	: The articles of organization or the application to transact business
(CHEC	K THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT
) inc	ntains an incorrect statement. The incorrect statement, the reason the statement is orrect, and the corrected statement are as follows:
<u> </u>	MADE A MI STAKE WITH THE NAME-filed ONLINE ON 11/17/6 THE CONECT NAME SHOULD BE:
	THE CORECT NAME SHOULD BE:
	Alfa34 LLC
	as defectively signed. The manner in which the document was defectively signed and appropriate correction are as follows: AHASSEE FLORIDA TAKE TAKE TO THE TAKE THE
Dated:	Nov. 17 Signature of a member or authorized representative of a member Evelina V. Vassilev Typed or printed name of signee Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)

CR2E062 (08/05)