(Requestor's Name) (Address) (Address)	8003431468	48
(City/State/Zip/Phone #)	04/27/2001022013	** 25.00
(Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	S TALLEN MAY 11	2020 APR 27 THE
Office Use Only	State week	

COVER LETTER

TO: Registration Section Division of Corporations

1905 BRICKELL PROPERTIES LLC

Name of Limited Liability Company

Dear Sir or Madam:

SUBJECT:

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

Please return all correspondence concerning this matter to the following:

MARIAN MOZOTA

Name of Person

Globalia Rent Management LLC

Firm/Company

19400 Turnberry Way Suite 2

Address

Aventura, FL 33180

City/State and Zip Code

mmozota@globaliarm.com

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

For further information concerning this matter, please call:

 MARIAN MOZOTA
 786
 346-8654

 Name of Person
 Area Code
 Daytime Telephone Number

 Mailing Address:
 Street Address:

 Registration Section
 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

S30 Filing Fee & Certificate of Status

□\$55 Filing Fee & Certified Copy S60 Filing Fee, Certificate of Status & Certified Copy

• •	
	STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY
Pursuar	t 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:
SECO	ND: The Florida Document number of the limited liability company is: L11000031160
THIRD	11/14/2019: Articles of Amendment to Articles of Organization
	(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:
	NUMERAL (D) ERRONEOUSLY STATED THE MEMBERS OF THE COMPANY.
	THE CORRECT MEMBERS OF THE COMPANY SHOULD BE:
	"P&P OF FLORIDA INVESTMENTS LLC, A FLORIDA LIMITED LIABILITY COMPANY (100%)"
	OR
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction ar as follows:
	70
	· AP
	· P :
	<u>OR</u>
	The electronic transmission of the record was defective.
	Signature of Authorized Representative Date Date re of new registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must sign ing the designation).
l hereby provisio obligati	egistered Agent's Signature, if changing Registered Agent: w accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the ions of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merel a change in the registered office address, I hereby confirm that the limited liability company has been notified in writin change.

Registered Agent's Signature

Filing Fee: Certified Copy:

\$25.00 \$30.00 (optional)

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