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### **COVER LETTER**

· TO: Registration Section Division of Corporations

11500 NW 42ND LLC

Document # L13000040600

Name of Limited Liability Company

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:

# Kathy Barral

Name of Person

## Mullen & Bizzarro, P.A.

Firm/Company

2929 East Commercial Boulevard, PH-C

Address

Fort Lauderdale, Florida 33308

City/State and Zip Code

# ipmullen@mullenbizzarro.com

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

For further information concerning this matter, please call:

Kathy Barral

Name of Person

#### 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:

■ \$25 Filing Fee

□ \$30 Filing Fee & Certificate of Status ■ \$55 Filing Fee & 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 requ business days to correct the attached articles of organization or application to transaction in Florida. FIRST: The name of the limited liability company is: 42ND 11500 NW SECOND: The articles of organization or the application to transact business (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT X Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: The name for the Registered Agent and Managing Member was incorrectly spelled. The correct spelling for the Registered Agent and the Managing Member is Uri Zarif. <u>OR</u> Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: March Dated: Signature of a member or authorized representative of a member Joseph P. Mullen, Esquire Typed or printed name of signee Filing Fee: \$25.00

Certified Copy:

\$30.00 (optional)