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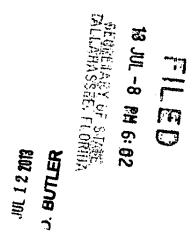
| (Requestor's Name) | | | | | |
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| (Ád | dress) | | | | |
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| (Cit | :y/State/Zip/Phon | e #) | | | |
| PICK-UP | ☐ WAIT | MAIL | | | |
| (Bu | siness Entity Nar | me) | | | |
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COVER LETTER

13 JUL -8 PH 6: 82

| TO: Registration Division of | n Section Corporations | ! . | | |
|--|--|------------------------------------|---|--|
| | ZILLA, LLC | | | |
| SUBJECT: | Name o | f Limited Liability Co | mpany | |
| Dear Sir or Madam: | | | | |
| The enclosed Article | es of Correction and fee(s) a | re submitted for filing. | | |
| | respondence concerning this | _ | <u> </u> | |
| Edward Bacha | | | ASSE ASSE | |
| | Name of Person | | | |
| MANZILLA, LL | С | | | |
| | Firm/Company | | | |
| 37145 Apiary F | Road | | • | |
| | Address | | _ | |
| Grand Island, I | FL 32735 | | | |
| | City/State and Zip Code | | _ | |
| eddiebacha@g | mail.com | | | |
| E-mail address | : (to be used for future annu | al report notification) | _ | |
| For further informat | ion concerning this matter, p | olease call: | | |
| Edward Bacha | | 352 | 617-3513 | |
| Na | nme of Person | at (Area Co | _) | |
| 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 (4/13) | | | | |

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

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

| FIRST MANZ | : The name of the li | mited liability compa | any is: | がある。 | | | | | |
|-----------------------------------|---|--|-------------------------------|----------|--|--|--|--|--|
| SECO | | •• | ication to transact business | LIVILY B | | | | | |
| (CH | ECK THE APPROPRIAT | E BOX AND COMP | <u>LETE THE APPLICABLE S</u> | TATEMENT | | | | | |
| | Contains an incorrect statement. The incorrect statement, the reason the statement incorrect, and the corrected statement are as follows: Incorrect: Mailene Bacha as MGR | | | | | | | | |
| | Correction: Edward Bacha is sole member, MGRM | | | | | | | | |
| | Mailene is currenty out of the US and needs to be removed since she cannot | | | | | | | | |
| | be present for other legal maters binding the LLC. | | | | | | | | |
| | OR Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| Dated: | 21 June | <u></u> | 2013 | | | | | | |
| | | | | _ | | | | | |
| | Signature of a m | Signature of a member or authorized representative of a member | | | | | | | |
| Edward Bacha, MGRM, Manzilla, LLC | | | | | | | | | |
| | Typed or printed name of signee | | | | | | | | |
| | | Filing Fee: Certified Copy: | \$25.00 \$30.00 (optional) | | | | | | |