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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

COVER LETTER

TO:

Registration Section
Division of Corporations

PIECE: PARKJOCKEY MIAMI, LLC

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:

LORNE E. BERKELEY, ESQ.

Name of Person

DANIELS &KASHTAN, PA.

Firm/Company

4000 PONCE DE LEON BLVD, SUITE #800

Address

CORAL GABLES, FL. 33146

City/State and Zip Code

LBERKELEY@DKDR.COM

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

For further information concerning this matter, please call:

LORNE E. BERKELEY, ESQ. at 305

305 44

Name of Person

Area Code & Daytime Telephone Numbe

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 PARK	The name of the limited liability company is: JOCKEY MIAMI, LLC				
<u>SECO</u>	ND: The articles of organization or the application to transact business				
<u>(CH</u>	ECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STA	<u> TEMENT</u>			
7	Contains an incorrect statement. The incorrect statement, the reason the statement incorrect, and the corrected statement are as follows: NAMES ARE SPELLED INCORRECTLY. PLEASE CHANGE "CIHAN KATION".				
	TO READ "CIHAN KUTUK." THIS CHANGE SHOULD BE MADE IN A	ARTICLES			
	IV & V.				
	THANK YOU.				
	<u>OR</u>				
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:				
	Λ Ι δ				
Dated:	Signature of a member or authorized representative of a member Lone E. Bekery, Esz. Typed or printed name of signee	13 AUG -8 I SECRETARY MALLAHASSEI			
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	PM 3: OF ST	(