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COVER LETTER

TO: Registration Section Division of Corporations	·*
SUBJECT: S.T.A.R.S. AUTISM SCHOOL, LLC (Do	cument # L13000104064)
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	g;
Elizabeth Rubio Mederos	
Name of Person	-
S.T.A.R.S. Autism School	
Firm/Company	_
1000 SW 86 CT	
Address	-
Miami, FL 33144	_
City/State and Zip Code	_
erubiomederos@att.net	_
E-mail address: (to be used for future annual report notification)	
•	
For further information concerning this matter, please call:	
Elizabeth Rubio Mederos at 786	<u>449-1535</u>
Name of Person Area Co	ode & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following amount:	
\$25 Filing Fee \$25 Filing Fee \$25 Certificate of Status Certified Copy	□ \$60 Filing Fee, Certificate of Status &

CR2E062 (4/13)

ARTICLES OF CORRECTION

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 attached articles of organization or application to transact business in Florida. FIRST: The name of the limited liability company is: S.T.A.R.S. AUTISM SCHOOL, LLC SECOND: The articles of organization or the application to transact business (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT 1 Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: The Managing Member Detail is incorrect. Managing Member Detail #1 Change from: C.M. HOLDINGS, LLC Managing Member Detail #1 Change to: CJM STRATEGIC HOLDINGS, LLC OR Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: 2013

Dated: July 25

of a member or authorized representative of a member

Elizabeth Rubio Mederos

Typed or printed name of signee

Filing Fee:

\$25.00

Certified Copy:

\$30.00 (optional)