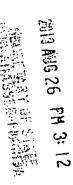
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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:

Sherian 441, 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:

Patricia Caphton

Name of Person

Kalis & Kleiman, P.A.

Firm/Company

7320 Griffin Road, Suite 109

Address

Davie, Florida 33314

City/State and Zip Code

lcb111260@yahoo.com

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

For further information concerning this matter, please call:

Patricia Caphton

J 954

791-0477

Name of Person

Area Code & Daytime Telephone Number

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 LIMITED LIABILITY COMPANY

Pursuant to Section 608.4115, F.S., this document is being submitted <u>within the required</u> 30 business days to correct the <u>attached</u> Articles of Organization.

FIRST: The name of the limited liability company is: SHERIAN 441, LLC.

SECOND: The Articles of Organization contain incorrect statements. The incorrect statements are

The name of the Limited Liability Company is: SHERIAN 441, LLC.

The name and address of managing members/managers are:

Title: MGRM LESTER C. BOGGS 4190 S.W. 75TH CIRCLE DAVIE, FL. 33314 US

Title: MGRM LESLEE GIBBS 1301 HARRISON STREET HOLLYWOOD, FL. 33020 US

The reason the statements are incorrect is that a typographical error was made in the name of the limited liability company and the limited liability company is a manager managed limited liability company not a member managed limited liability company. The correct statements are as follows:

The name of the Limited Liability Company is: SHERIDAN 441, LLC

The name and address of managing members/managers are:

Title: MGR LESTER C. BOGGS 4190 S.W. 75TH CIRCLE DAVIE, FL. 33314 US

Title: MGR LESLEE GIBBS 1301 HARRISON STREET HOLLYWOOD, FL. 33020 US

Dated: August 22, 2013.

超13 M86 26 PM 3: 13

Electronic Articles of Organization For Florida Limited Liability Company

L13000116222 FILED 8:00 AM August 16, 2013 Sec. Of State kasaly

Article I

The name of the Limited Liability Company is: SHERIAN 441, LLC.

Article II

The street address of the principal office of the Limited Liability Company is:

4190 S.W. 75TH CIRCLE DAVIE, FL. US 33314

The mailing address of the Limited Liability Company is:

4190 S.W. 75TH CIRCLE DAVIE, FL. US 33314

Article III

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

NEAL R KALIS 7320 GRIFFIN ROAD, SUITE 109 DAVIE, FL. 33314

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: NEAL R. KALIS

Article V

The name and address of managing members/managers are:

Title: MGRM LESTER C BOGGS 4190 S.W. 75TH CIRCLE DAVIE, FL. 33314 US

Title: MGRM LESLEE GIBBS 1301 HARRISON STREET HOLLYWOOD, FL. 33020 US L13000116222 FILED 8:00 AM August 16, 2013 Sec. Of State kasaly

Signature of member or an authorized representative of a member

Electronic Signature: LESTER C. BOGGS

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.