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(Re	equestor's Name)	
(Ac	ddress)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	1
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P. SCOTT FED - 7 2013

COVER LETTER

TO: Registration S Division of C				
SUBJECT: SP I	Realty Florid	a LLC		
	4	Same of Limited Liab	oility Company	
Dear Sir or Madam:				
The enclosed Statemen	ut of Correction and fee(s) a	re submitted for filing	g.	
Please return all corres	pondence concerning this n	natter to the following	g:	
Aaron Res	snick, Esq.			
	Name of Person	· · · · · · · · · · · · · · · · · · ·	_	
Aaron Res	snick, P.A.			
	Firm/Company		_	
100 N. Bisc	ayne Blvd, Su	ite 1607		
	Address		-	
Miami, Flo	rida 33132			
	City/State and Zip Code		-	
	thefirmmian to be used for future annual		-	
For further information	concerning this matter, ple	ease call:		
Aaron Res	snick, Esq.	_{at (} 305	Daytime Telephone Nu	77.5
Name	e of Person	Area Code	Daytime Telephone Nu	mber 75 G
STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, Florida 32	ns Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 3231-	A A III II
Enclosed is a check fo	r the following amount:			
S25 Filing Fee	S30 Filing Fee & Certificate of Status	\$55 Filing Fee Certified Copy	& S60 Filing Fee, Certificate of Status & Certified Copy	È

CR2E062 (9/15)

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

		Filing Fee: Certified Copy:	\$25.00 \$30.00 (optional)			
		Registered Age	·			
		Danistee 4 A	- Pa Classia	_		
I here. provis obliga reflect	by acceptions of a tions of a	ad Agent's Signature, if changing Registered Agent; at the appointment as registered agent and agree to a all statutes relative to the proper and complete performy position as registered agent as provided for in Cage in the registered office address, I hereby confirm to	rmance of my duties, and I am fa hapter 605, F.S. Or, if this docum	miliar with and ac nent is beine filed	ccept the	
Signat	ture of no	ew registered agent, if applicable :(NOTE: if correct lesignation).	ting the registered agent, the new	registered agent i	must sign	
		Signature of Authorizad Representative	Date	95: =		
<u>-</u>	The el	lectronic transmission of the record was defective.	الم	41 04 A		
•	<u>OR</u>			留一	-	
				2018 T	 	
	as foll	lefectively signed. The manner in which the docume lows:	ent was defectively signed and th	e appropriate corr	ection are	
 -	<u>OR</u>	16 1				
		agor or this company. Also, allamsuodin Calani s	House not have been removed a	S AMDR.		
		ani Developers LLC should ager" of this company. Also, Shamsuddin Lalani s				
		ani Developers LLC was inc		 		
×	statement are as follows:					
	!	(CHECK THE APPROPRIATE BOX AND COM	IPLETE THE APPLICABLE	<u>STATEMENT</u>		
THIE	THIRD: Document to be corrected is: 2016 Articles of Amendment					
SEC	OND:	The Florida Document number of the limited liab	ility company is: L13000	127273	<u> </u>	
		name of the limited liability company is: SP Re		ocument.		
Pursu	ant to se	ction 605.0209, F.S., this document is being submitted	ed to correct a previously filed do	ocument		