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T. BROWN

COVER LETTER

TO:

CR2E062 (12/13)

Registration Section

Division of Corporations SALT H20RX LLC Name of Limited Liability Company Dear Sir or Madam: The enclosed Statement of Correction and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: MICHAEL J SOVIE SALT H2ORX LLC Firm/Company 819 HARBOR IS Address CLEARWATER, FL 33767 City/State and Zip Code MICHAEL.SOVIE@HOTMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Name of Person STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: \$25 Filing Fee □ \$30 Filing Fee & ☐ \$55 Filing Fee & □ \$60 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy

STATMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document.

FIRST:		The name of the limited liability company is:
		The name of the limited liability company is: SALT H20RX LLC
<u>SECO</u>	<u>)ND</u> :	Document to be corrected is: L14000022670
	(CHEC	CK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT
x	and the	ins an incorrect statement. The incorrect statement, the reason the statement is incorrect, c corrected statement are as follows:
		ME TRANSCRIPTION ERROR, NEED TO CHANGE
	FR	OM SALT H20RX LLC TO SALT H2ORX LLC
	H20	(0=NUMBER ZERO) CHANGED TO H2O (O = ALPHABET "O")
	H20	O (ALPHABET LETTER) IS DESIRED SPELLING
	<u>OR</u>	
Was defectively signed. The manner in which the document was defeappropriate correction are as follows:		efectively signed. The manner in which the document was defectively signed and the oriate correction are as follows:
		
	OR	
	The el	ectronic transmission of the record was defective.
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31	granure	of Authorized Representative Date
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