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B. BOSTICK APR **2 4** 2014

**FXAMINER** 

## **COVER LETTER**

	stration S sion of Co	ection orporations				
SUBJECT:	Design	er Outlets of Tucsor	ı, LLC			
SOBOLCI.		1	Name of Limited Liab	ility Company		
Dear Sir or M	[adam;		•			
The enclosed	Statemen	at of Correction and fee(s)	are submitted for filing	<u>.</u>		
Please return	all corres	pondence concerning this i	matter to the following	<b>;</b>		
Ezra Katz						
	· 	Name of Person	<del> </del>	-		
Aztec Gro	oup, Inc					
<del></del>	_	Firm/Company		-		
2665 Sou	th Bays	shore Drive PH 2A				
		Address		-		
Miami, FL	3313	3				
		City/State and Zip Code		-		
sshwake(	@aztec	group.com			•	2 <u>0</u> 14
E-mail	address: (	to be used for future annua	l report notification)	_	٠.	1.3
						<u>.,</u>
For further in	nformation	n concerning this matter, p	lease call:		•:	Ū
Susie Sh	wake-F	edele	305 at (	938-8627		() ()
	Nam	e of Person	Area Code	Daytime Telephone Number		o-
STREET/CO Registration : Division of C Clifton Build 2661 Executi Tallahassee,	Section Corporation ling ive Cente	ons r Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314		
Enclosed is a	a check f	or the following amount:				
\$25 Filing	g Fee	☐ \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy	□ \$60 Filing Fee, Certificate of Status & Certified Copy		

CR2E062 (2/14)

## STATEMENT 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. The name of the limited liability company is: \_\_\_\_\_ Designer Outlets of Tucson, LLC FIRST: The Florida Document number of the limited liability company is: L14000061631 SECOND: Document to be corrected is: THIRD: Authorized Person(s) Detail (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: Additional MGR to be listed: Name: Daniel Cetina Title: MGR Address: 3322 NE 16th Place, Fort Lauderdale, FL 33305 OR  $\Box$ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: <u>OR</u> The electronic transmission of the record was defective. Signature of Authorized Representative

> Filing Fee: Certified Copy:

\$25.00

\$30.00 (optional)