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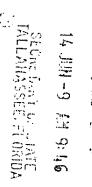
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COVER LETTER

TO: Registration Section **Division of Corporations** A & Y REAL ESTATE HOLDINGS, 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: Oscar Delgado Name of Person Delgado & Delgado, PA Firm/Company 14160 NW 77 Ct, #33 Address Miami Lakes, Fl. 33016 City/State and Zip Code ojdlaw@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Oscar Delgado 363-4200 Name of Person Daytime Telephone Number STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section **Division of Corporations Division of Corporations** Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount:

CR2E062 (2/14)

■ \$25 Filing Fee

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□ \$60 Filing Fee,

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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: A & Y REAL ESTATE HOLDINGS, LLC FIRST: The Florida Document number of the limited liability company is: L14000075922 SECOND: THIRD: Document to be corrected is: **Articles of Organization** (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: The street address of the principal office and the mailing address of the Limited Liability Company (LLC) and the address of the person authorized to manage the LLC is incorrect and shall be corrected to: 1210 SW 176 Way, Pembroke Pines, Fl. 33029. Further: Rashid Elghoul's title shall be corrected to AMBR. <u>OR</u> Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: OR The electronic transmission of the record was defective. June 4th, 2014 Signature of Authorized Representative Date

Filing Fee: Certified Copy:

\$25.00

\$30.00 (optional)