

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000058270 3)))



H150000582703ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

TO:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name

: SPOTTSWOOD, SPOTTSWOOD AND SPOTTSWOOD

Account Number : I20120000049 Phone

: (305)294-9556

Fax Number

: (305)292-1982

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

060051420

LLC AMND/RESTATE/CORRECT OR M/MG RESIGNS COBO DRIFTWOOD, LLC

Paris and taken the between the property of the Total Conference	<u> </u>
Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

H15000058270 3

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursi	uant to s	ection 605.0209, F.S., this document is being submitted to correct a previously filed document.		
<u>FIRS</u>	<u>8T</u> ;	The name of the limited liability company is: COBO DRIFTWOOD, LLC		
SEC	OND:	The Florida Document number of the limited liability company is:		
THI	RD:	Document to be corrected is: FLORIDA LIMITED LIABILITY COMPANY ARTICLES OF ORGANIZATION		
	<u>(Cl</u>	HECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT		
Ø		ins an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the statement are as follows:		
	AMB	R COBO, ANNA A. NAME IS MISSPELLED		
	СОВ	COBO, ANA A. IS THE CORRECT NAME OF THIS AMBR		
	<u>OR</u>			
. 🔲		efectively signed. The manner in which the document was defectively signed and the appropriate tion are as follows:		
		7. '≥		
		LEC DIS		
		AHAS:		
	<u>or</u>	SET 6		
	The el	ectronic transmission of the record was defective.		
<u> </u>	ignature Eri	Of Authorized Representative Oate La H. Sterling		
	_	Filing Fact \$25.00		

Filing Fee: Certified Copy: \$25.00

\$30.00 (optional)

H15000058270 3