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COVER LETTER

	tration Section ion of Corporations		
SUBJECT:	Solacium LLC		
Name of Limited Liability Company			oility Company
Dear Sir or M	adam:	•	
The enclosed	Statement of Correction and fee(s) a	are submitted for filing	g.
Please return a	Il correspondence concerning this r	natter to the following	g:
Charles B.	Koval		
· · ·	Name of Person		_
Dell Graha	m PA		
	Firm/Company		_
203 NE 1s	t Street		
	Address		
Gainesville	e, FL 32601		
	City/State and Zip Code		-
_	ellgraham.com		
E-mail a	ddress: (to be used for future annua	report notification)	-
For further inf	ormation concerning this matter, pl	ease call:	
Charles B.	Koval	352	372-4381
	Name of Person	Area Code	Daytime Telephone Number
Registration S Division of Co Clifton Buildi	orporations ng e Center Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a	check for the following amount:		
• \$25 Filing	Fee \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy
CR2E062 (2/1	4)		



JOHN D. JOPLING* CARL B. SCHWAIT*† ELLEN R. GERSHOW! DAVID M. DELANEY*** SUSAN M. SEIGLE!! MICHAEL S. DONSKY*

CHARLES B. KOVAL** RYAN L. GILBERT JAMIE LYNN WHITE CHRISTOPHER M. LONG DAPHNE D. SADDLER

April 8, 2015

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE: Solacium, LLC

Document No.: L150000049468

To Whom It May Concern:

Enclosed please find check number 027931 in the amount of \$25.00 as payment to correct a previously filed document. For reference I have attached the correction statement.

If you have any questions please do not hesitate to call me.

Sincerely,

Charles B. Koval

harlets Hould

/jrl

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	IRST: The name of the limited liability company is: Solacium LLC					
SECOND:		The Florida Document number of the limited liability company is: L150000049468 Document to be corrected is:				
	<u>(Cl</u>	HECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT				
Y		Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:				
	The I	The Principal Address, Mailing Address, and Address of the Sole Member were				
	incor	incorrectly stated as 2446 NW 16th Place. Each of them should have been				
	state	stated as 2446 NW 13th Place, Gainesville, FL 32605				
	<u>OR</u>	52!				
		defectively signed. The manner in which the document was defectively signed and the appropriate stion are as follows:				
		PH 2: 57				
	<u>OR</u>					
	Qh	lectronic transmission of the record was defective. March 30, 2-015 of Authorized Representative Date				

Filing Fee: Certified Copy:

\$25.00

\$30.00 (optional)