

LI 5000 108 352

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

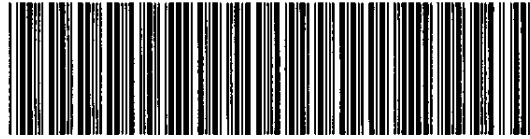
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TALLAHASSEE, FLORIDA

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 06 2015
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Santa Barbara Leasing, 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:

Hunter B. Craig

Name of Person

Witte & Craig, P.A.

Firm/Company

201 Southeast 24th Avenue

Address

Pompano Beach, FL 33062

City/State and Zip Code

HBCraig@witteandcraig.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Hunter B. Craig

Name of Person

at (954)

Area Code

941.5533

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|--|
| <input type="checkbox"/> \$25 Filing Fee | <input checked="" type="checkbox"/> \$30 Filing Fee &
Certificate of Status
69.17 | <input type="checkbox"/> \$55 Filing Fee &
Certified Copy | <input type="checkbox"/> \$60 Filing Fee,
Certificate of Status &
Certified Copy |
|--|---|--|--|

CR2E062 (2/14)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 22, 2015

HUNTER B CRAIG
WITTE & CRAIG, P.A.
201 SOUTHEAST 24TH AVENUE
POMPANO BEACH, FL 33062

SUBJECT: SANTA BARBARA LEASING, LLC
Ref. Number: L15000108352

We have received your document for SANTA BARBARA LEASING, LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1)(b), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 915A00015416

FILED
15 AUG - 3 PM 4: 01
OFFICE OF THE
CLERK OF THE
STATE
TALLAHASSEE, FLORIDA

**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.

FIRST: The name of the limited liability company is: Santa Barbara Leasing, LLC

SECOND: The Florida Document number of the limited liability company is: L15000108352

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 preamble references Chapter 608 of the Florida Statutes. As of
January 1, 2015, all filings are under Chapter 605 of the Florida
Statutes. The preamble is corrected to read: (See Attached)

OR

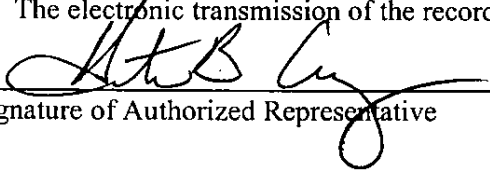


Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

OR



The electronic transmission of the record was defective.


Signature of Authorized Representative

7/29/15
Date

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15 AUG - 3 PM 4: 01
CLERK OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

ARTICLES OF ORGANIZATION CORRECTED PREAMBLE

"The undersigned, under the provisions of Chapter 605 of the Florida Statutes (the"Act"), for the purpose of forming a limited liability company under the laws of the State of Florida, do set forth the following:"