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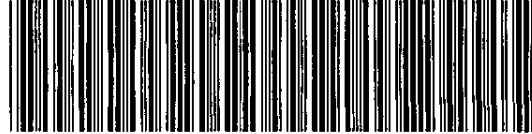
(Business Entity Name)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUL 20 2015

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: CRESK PARTNERS, 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:

John M. Hemenway, Esq.

Name of Person

Bivins & Hemenway, P.A.

Firm/Company

1060 Bloomingdale Ave.

Address

Valrico, FL 33596

City/State and Zip Code

jhemeway@bhpallaw.com

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

For further information concerning this matter, please call:

John M. Hemenway, Esq.

813

643-4900

Name of Person

at ( )

Area Code

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:

- ☒ \$25 Filing 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.

**FIRST:** The name of the limited liability company is: CRESK PARTNERS, LLC

**SECOND:** The Florida Document number of the limited liability company is: L15000117470

**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 filed Articles of Organization listed Venugopal Chidarala as Manager.

Manik Chamarthi was appointed to serve as Manager.

Accordingly, the correct Manager of the Company is Manik Chamarthi,

with a mailing address of 9355 113th St #8790, Seminole, FL 33775.

**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

07/16/15  
Date

**FILED**  
15 JUL 17 AM 11:36  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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