

L15000139204

Aug 21 15 09:45

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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((H15000201746 3)))



H150002017463ABC

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : LAW OFFICE OF RAWNY GARAY, P.A.
Account Number : I20040000004
Phone : (305) 373-8355
Fax Number : (305) 373-8353

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

Email Address: GARAY@RGARAYLAW.COM

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TALLAHASSEE, FLORIDA

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SAN ESTEBAN 305 LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
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K. SALY
EXAMINER
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8/21/2015 8:54:48 AM PAGE 1/001 Fax Server

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August 21, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SAN ESTEBAN 305 LLC
1831 SW 27TH AVE
MIAMI, FL 33145

SUBJECT: SAN ESTEBAN 305 LLC
REF: L15000139204

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

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

FAX Aud. #: H15000201746
Letter Number: 015A00017670

RECEIVED
15 AUG 21 AM 9:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P.O. BOX 6327 - Tallahassee, Florida 32314

950-245-6050

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: San Esteban 305 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:

Rawny Garay, Esq.

Name of Person

Rawny Garay, P.A.

Firm/Company

1831 SW 27th Avenue

Address

Miami, FL 33145

City/State and Zip Code

garay@rgaraylaw.com

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

For further information concerning this matter, please call:

Rawny Garay, Esq.

Name of Person

305

at (_____) _____

Area Code

373-8355

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)

FILED

2015 AUG 21 AM 9:01

SECRETARY OF 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: San Esteban 305 LLC

SECOND: The Florida Document number of the limited liability company is: L15000139204

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 member name is incorrect. The member name should read


RICARDA MARIN not Ricardo Marin

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

8/21/2015
Date

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