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COVER LETTER

Division of Cor				
SUBJECT:	RK FREE	PROPERTINATION Anne of Limited Liab	Dility Company	
Dear Sir or Madam:				
The enclosed Statement	of Correction and fee(s) a	re submitted for filin	g.	
Please return all correspondence	ondence concerning this r	matter to the following	gʻ.	
KIM RK FREE	Name of Person PROPERT Firm/Company	ESUC	_	
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CRESTIEN TO 32536 City/State and Zip Code				
Kime Sunshine) romows a communication E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
KIM FR	of Person	at (Area Code	Daytime Telephone Number	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is a check for the following amount:				
\$25 Filing Fee	S30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	 \$60 Filing Fee, Certificate of Status & Certified Copy 	

 $\boldsymbol{r} = (r_1, r_2, \ldots, r_m) \cdot \boldsymbol{r}$

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: The Florida Document number of the limited liability company is: L **SECOND:** THIRD: Document to be corrected is: (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: Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: <u>OR</u> The electronic transmission of the record was defective. Signature of Authorized Representative Date Signature of new registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation). New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change. Registered Agent's Signature

Filing Fee:

Certified Copy:

\$25.00

\$30.00 (optional)