L15000195878

(Re	equestor's Name)			
(Ad	idress)				
(Ac	idress)				
(Cit	ty/State/Zip/Phor	ne #)			
PICK-UP	☐ WAIT	MAIL			
(Ви	ısiness Entity Na	me)			
(Document Number)					
Certified Copies	_ Certificate	es of Status			
Special Instructions to	Filing Officer:	`			





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12/14/15--01053--003 **25.00

J. HARRIS

COVER LETTER

TO: Registration Sec Division of Coη							
SUBJECT: BO-	tanitas E	Elvis Li	y Company				
			, comp,				
Dear Sir or Madam:							
The enclosed Statement of	of Correction and fee(s) are	e submitted for filing.					
Please return all correspo	ndence concerning this ma	atter to the following:					
N. Jane 9	Name of Person	EA					
East Washi	ngton Acco	unting					
POBOX (Address						
Pierson,	FL 3218 ty/State and Zip Code	<u>}O</u>					
medickie E-mail address to	be used for future annual r	wh ne	 				
For further information of No. Tank. F	oncerning this matter, plea	ise call:	749-9010				
Name o	f Person	Area Code	Daytime Telephone Number				
STREET/COURIER A Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, Florida 323	ircle	R D P.	IAILING ADDRESS: egistration Section ivision of Corporations O. Box 6327 allahassee, 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 (9/15)



December 16, 2015

N JANE PUCKETT, EA EAST WASHINGTON ACCOUNTING SERVICES, INC PO BOX 1006 PIERSON, FL 32180

SUBJECT: BOTANITAS ELVIS, LLC

Ref. Number: L15000195878

We have received your document for BOTANITAS ELVIS, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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: 915A00026370

200 JAN 19 AH III II

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

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		•		tted to correct a previou	•	ıt.	
FIRST:	The name of the	limited liability com	pany is:	initas Eli	11S, LL	<u> </u>	-
						 	_
SECON	The Flo	rida Document numb	^		<u>500019</u>	37878	≥
THIRD: Document to be corrected is: Articles of Organization							
	(CHECK	THE APPROPRIAT	TE BOX AND CO	MPLETE THE APPL	ICABLE STATE	EMENT	
	Contains an incostatement are as		incorrect statemen	t, the reason the stateme	ent is incorrect, an	d the correct	ted
	Effect	rive date	z of ori	ginal filin	<u>g should</u>	1 hav	2
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	<u>OR</u>						
		signed. The manner	in which the docu	ment was defectively sig	ned and the appro	opriate correc	ction are
	as follows:					····	
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						7.1. Sec	m manara
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	<u>OR</u>				i		A. C.
	The electronic t	ransmission of the rec	cord was defective.		;	55 -	«
	i el.	\mathcal{L}		1	01-14-9	376=	
·	Signa	ture of Authorized R	epresentative		Date		_
Signatur	e of new registe	red agent, if applicab	le :(NOTE: if corre	ecting the registered age	nt, the new regist	ered agent m	ıust sign
acceptin	g the designatio	n).					
I hereby provisio obligation	accept the appoints of all statutes ons of my position change in the re	relative to the prope on as registered agent	l agent and agree to r and complete per t as provided for in	<u>t:</u> 5 act in this capacity. I fi formance of my duties, c Chapter 605, F.S. Or, ij n that the limited liabilit	and I am familiar Tthis document is	with and acc being filed to	ept the o merely
-	_						
		(1) 	Registered A	gent's Signature			
			Filing Fee:	\$25.00			

Certified Copy:

\$30.00 (optional)