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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Mauro & Mauro Investments it C 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:	
VICTORIA O 'Oay Name of Person	
mauro & mauro Investments LCC Firm/Company	
4037 Virginia DY Address	
Orlando FL 32803 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Victoria 0 nay at (407-) 375-6990	
Name of Person Area Code Daytime Telephone Num	ber
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:	
\$25 Filing Fee Certificate of Status \$30 Filing Fee Certified Copy \$55 Filing Fee Certificate of Status Certified Copy \$60 Filing Fee, Certified Copy Certified Copy	
CR2E062 (9/15)	

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: Mauy 0 maura investments 220 The Florida Document number of the limited liability company is: L | \(\omega 0000 \) \(\omega 95 \) SECOND: Document to be corrected is: Articles of Amandment THIRD: (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: added Michal Mauro Jr. as a manager, I incorrectly and 1 CDYYPO+ nami Orlando FL 32803 4038 Virginia Ω r address Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: OR \Box The electronic transmission of the record was defective. 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: \$25.00

Certified Copy:

\$30.00 (optional)