Florida Department of State Division of Corporations

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Division of Corporations

Fax Number.

: (850)617-6383

From:

Account Name : MITTENTHAL KEINSTEIN

Account Number : 120130000041 Phone

: (561)862-0955

Fax Number : (561)665-5028

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN LOFT 33 LLC

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APR 1 9 2016

COVER LETTER

	COVERTEITER			
TO: Registration Sec Division of Corp				
SUBJECT: Loft 3	3 LLC			
	N	ame of Limited Liabili	ty Company	
Dear Sir or Madam:				
The enclosed Statement of	of Correction and fee(s) ar	e submitted for filing.		
Please return all correspo	ndence concerning this m	atter to the following:		
Jeffrey C:W	/einstein			
and an analogy of differ the actions only the terramon working about	Name of Person			
Mittenthal V	Veinstein LL	_P		
	Firm/Company			
3100 S Federal Highway Suite B				
	Address			
Delray Beach, FL 33483				
City/State and Zip Code				
weinstein@)mw-attorne	ys.com		
E-mail.address: (to	be used for future namual.	report natification)		
For further information c	oncerning this matter, ples	ase caji:		
Jeffrey C Weinstein 561 8620955				
Nume of Person Area Code Daytime Telephone Number				
STREET/COURIER ADDRESS: Registration Section Division of Corporations MAILING ADDRESS: Registration Section Division of Corporations				
Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301				
Enclosed is a check for the following amount:				
S25 Filing Fee	S30 Filing Fee & Certificate of Status	S55-Filing Fee & Gertified Copy	S60 Filing Fee, Certificate of Status & Certified Copy	
CR2E062 (9/15)				



STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuar FIRST	it to sec The na	me of the limited liability company is: Loft 33	ed to correct a previously filed document.
SECON THIRD	<u>ND:</u>	The Florida Document number of the limited liab Document to be corrected is: Articles of	ility company is: L16000060212
	Œ	CHECK THE APPROPRIATE BOX AND COM	IPLETE THE APPLICABLE STATEMENT
×	statem	is an incorrect statement. The incorrect statement, ent are as follows: Manager!s name is spelle	the reason the statement is incorrect, and the corrected dincorrectly.
	The	correct spelling is "CARO	LE LEBRUN"
	OR Was do as follo	Lectively signed. The manner in which the docum	ent was defectively signed and the appropriate correction are
			A IO: SU
		rey C Weinstein	04/18/2016
New Re I hereby provision obligate	ng the d egistered vaccept ons of a ions of n change	esignation). Agent's Signature, if changing Registered Agent: The appointment as registered agent and agree to I statutes relative to the proper and complete perform position as registered agent as provided for in Complete.	Date the registered agent, the new registered agent must sign act in this capacity. I further agree to comply with the rmance of my duties, and I am familiar with and accept the Diapter 605, F.S. Or, if this document is being filed to merely that the limited liability company has been notified in writin
		Registered Age	ent's Signature
		Filing Fee: Certified Copy:	\$25,00 \$30,00 (optional)