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| (Requestor's Name) |
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COVER LETTER

| TO: Registration Sec Division of Corp | | | | | |
|---|---|----------------------------------|--|----------------|--|
| SUBJECT: FUNY | lell one In | lame of Limited Liabili | LC ity Company | | |
| Dear Sir or Madam: | | | | | |
| The enclosed Statement of | of Correction and fee(s) a | re submitted for filing. | | | |
| Please return all correspo | ndence concerning this m | natter to the following: | | | |
| Elioth W | Name of Person | | | | |
| Funnell | One Investor Firm/Company | nent LLC | | | |
| 667 James | Address Address | م)مال | | 2016 TALL | |
| 17/4ama | ty/State and Zip Code | 32714 | | | |
| E-mail address: (to | be used for future annual | report notification) | | JUN 15 P 3: 00 | |
| For further information co | oncerning this matter, ple | ase call: | |); O | |
| Eliott Will Name o | liem son f Person | at (9 () Area Code | 554 8208 Daytime Telephone Number | <u></u> | |
| STREET/COURIER AI Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, Florida 3230 | ircle | R E P | MAILING ADDRESS: Legistration Section Division of Corporations LO. Box 6327 Sallahassee, Florida 32314 | | |
| Enclosed is a check for t | 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)

STATEMENT OF CORRECTION FOR . FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

| Pursuan | nt to sect | tion 605.0209, F.S., this document is being submitted to correct a previous | ously filed document | :_ | | | | |
|-----------------------------------|--|--|--|---|--|--|--|--|
| <u>FIRST</u> | : The na | ame of the limited liability company is: Funnel One | Investmen | ts UC | | | | |
| SECON | <u>ND:</u> | The Florida Document number of the limited liability company is: | -16000 IID | 742 | | | | |
| THIRD |) : | Document to be corrected is: L\6 000110742 | | | | | | |
| | ((| CHECK THE APPROPRIATE BOX AND COMPLETE THE APP | LICABLE STATE | <u>MENT</u> | | | | |
| | Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: | | | | | | | |
| - | The | e spelling of the LLC is wron | <u>مذ + : </u> | | | | | |
| | <u> </u> | e spelling of the LLC is wron elled Funnell and it Should b | e Funn | el one | | | | |
| | | nuestment LC | | | | | | |
| | <u>OR</u> | | | | | | | |
| | Was de | efectively signed. The manner in which the document was defectively sows: | igned and the appro | priate correction are | | | | |
| | | | | | | | | |
| | | and the second s | | 3 | | | | |
| | Ine ele | ectronic transmission of the record was defective. 6 - Compared to the second state of Authorized Paperson to the second state of the | 7-16 | | | | | |
| New Re I hereby provisio obligati | ng the de egistered y accept ons of al ions of n a change | Signature of Authorized Representative we registered agent, if applicable: (NOTE: if correcting the registered agesignation). d Agent's Signature, if changing Registered Agent: the appointment as registered agent and agree to act in this capacity. It statutes relative to the proper and complete performance of my duties, my position as registered agent as provided for in Chapter 605, F.S. Or, e in the registered office address, I hereby confirm that the limited liability. | further agree to cor and I am familiar v if this document is l | mply with the vith and accept the being filed to merely | | | | |
| Registered Agent's Signature | | | | | | | | |
| | | Filing Fee: \$25.00 Certified Copy: \$30.00 (option | onal) | | | | | |