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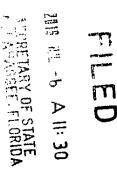
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## **COVER LETTER**

TO: Registration Section Division of Corporations MANIV INVESTMENTS, LLC 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: RITA JACKMAN Name of Person JACKMAN, STEVENS & RICCIARDI, PA Firm/Company 4575 VIA ROYALE-SUITE 200 Address FORT MYERS, FL 33919 City/State and Zip Code RJACKMAN@YOUR-ADVOCATES.ORG E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: RITA JACKMAN Name of Person Daytime Telephone Number STREET/COURIER ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section Division of Corporations 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: \$25 Filing Fee \$30 Filing Fee & \$55 Filing Fee & \$60 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy

CR2E062 (9/15)

## STATEMENT OF CORRECTION FOR 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: MANIV INVESTMENTS, LLC The Florida Document number of the limited liability company is: <u>L1</u>6000122484 SECOND: Document to be corrected is: ARTICAL OF ORGANIZATION 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: MENIV INVESTMENTS, LLC <u>OR</u> Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: OR The electronic transmission of the record was defective. RITA JACKMAN Signature of Authorized Representative 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)