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PICK-UP	WAIT	MAIL
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Certified Copies	Certificate	s of Status
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Statement orrect

19 OCT - 7 PM 1: 88

COVER LETTER

Division of Corporations	
SUBJECT: Ener YACHT	LLC
Nan Nan	ne of Limited Liability Company
Dear Sir or Madam:	
The enclosed Statement of Correction and fee(s) are s	submitted for filing.
Please return all correspondence concerning this matt	er to the following:
Christine Van Hulle	<u>-</u>
ENERYACHT LLC	
1314 E Las Olas Address	Blvd #106
FORT LAUDERDALE F City/State and Zip Code	L 33301
Cvanhull @ yahoo, C E-mail address: (to be used for future annual rep	port notification)
For further information concerning this matter, please	e call:
Christine Van Hulle Name of Person	at (954) 850 4360 Area Code Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 Englosed is a check for the following amount:	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:	
\$25 Filing Fee \$\ \tag{S30 Filing Fee & Certificate of Status}	\$55 Filing Fee & \$60 Filing Fee. Certified Copy Certificate of Status & Certified Copy

CR2E062 (9/15)

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANYOR AND COMPANYOR COMPANYOR AND COMPANYOR COM

Pursuar	it 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: ENERYACHT LLC		
SECON			
THIRD	Document to be corrected is: DSSCIATION OF RESIGNATION OF MEMBER CR2E879		
	(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT		
Ø	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:		
\\# <u></u>	4. I. Christine M Van Hulle hereby withdraw/resign as Mbr/mgr"		
	Incorrect because I took a leave of absence + did not withdraw I would like to withdraw form CRZE079 and note in ky) the State records that I took a leave of absence of for 1.1/2 months, returning Feb 1, 2019. Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are		
	on factile manths returning Feb 1, 2010		
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are		
	as follows: Christins lan Halle		
	- MBOME		
	OR PROGRAM		
	The electronic transmission of the record was defective.		
	Signature of Authorized Representative Date Compared Compare		
	re of new registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must sign ng the designation).		
I hereby provision obligati	egistered Agent's Signature, if changing Registered Agent: y accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the ions of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing change.		
Registered Agent's Signature			

\$25.00

\$30.00 (optional)

Filing Fee: Certified Copy:

CP2E062 (0/15