

L17000009258

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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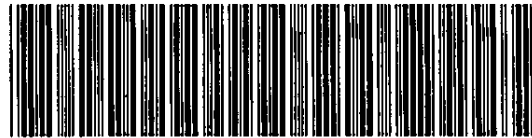
(Business Entity Name)

(Document Number)

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: EZEKIEL 317, 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:

LUIS STERLING  
Name of Person

EZEKIEL 317, LLC  
Firm/Company

335. E 6th AVE  
Address

WINDERMERE, FL 34786  
City/State and Zip Code

LSTERLING@EZEKIEL317.COM  
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

LUIS STERLING at (321) 297-6528  
Name of Person Area Code Daytime Telephone Number

### STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

### 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      ☐ \$30 Filing Fee & Certificate of Status      ☐ \$55 Filing Fee & Certified Copy      ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

**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: EZELIEL 317, LLC

**SECOND:** The Florida Document number of the limited liability company is: L17000009258

**THIRD:** Document to be corrected is: EZELIEL 317, LLC

**(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:  
Articles of Organization filed needs to be corrected.  
Spelled name wrong. The name should be  
EZEKIEL 317, LLC. Need to change the first  
L to a K.  
**OR**

☐ 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.

Luis A. Sterling  
Signature of Authorized Representative

1/17/17  
Date

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STATE  
SECRETARY OF  
TALLAHASSEE, FLORIDA  
17 JAN 19 PM 2:54

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)

1/17/2017

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.STERLING@EZEKIEL317.COM

11-17-2017 09:52 AM

les of Organization for EZEKIEL317, LLC were filed electronically  
y 11, 2017, effective January 11, 2017, as verified  
mail and authentication number shown below and were  
document number L17000009258. Please refer to this  
enever corresponding with this office.

low up to 24 hours for your record to appear on Sunbiz.org.

c filing and certification is provided for in section  
orida Statutes and has the same legal effect as any  
ing or certificate.

in "active" status with the Division of Corporations,  
report must be filed yearly between January 1st and  
eginning in the year following the file date or effective  
cated above. If the annual report is not filed by May  
00 late fee will be added. It is your responsibility  
er to file your annual report in a timely manner.

Employer Identification Number (FEI/EIN) will be required  
report is filed. Apply today with the IRS online at:

[www4.irs.gov/modiein/individual/index.jsp](http://www4.irs.gov/modiein/individual/index.jsp)

aware if the limited liability company's address changes,  
responsibility of the limited liability company to  
is office.

u have any questions regarding this matter, please contact  
ce at the address given below.

Cardwell

ion Section

on of Corporations - P.O. Box 6327 - Tallahassee, FL

mber: 170117095321-800294205388

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