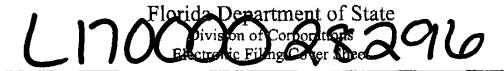
2/14/2017

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000042995 3)))



H170000429953ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : ARAZOZA & FERNANDEZ-FRAGA P.A.

Account Number : 076624003440

: (305)444-6226

Phone Fax Number

: (305)442-4829

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

FMati	Address:			

LLC AM	ND/RESTAT	TE/CORRECT̈́ ΟΙ	R M/MG	RESIGN
	LUSHLIF	E COMMERCIA	L LLC	

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$30.00

FEB 15 MINENS

Electronic Filing Menu

Corporate Filing Menu

Help

TEBLIA PH 3: 31

1/1

CR2E062 (9/15)

02/14/2017 13:54 3054424829 H17000042905-3 COVER LETTER -TO: Registration Section Division of Corporations LUSHLIFE COMMERCIAL LLC Name of Limited Liability Company Dear Sir or Madam: The enclosed Statement of Correction and fee(s) are submitted for filling. Please return all correspondence concerning this matter to the following: LAURA KOHN HARAZOZA & FERNANDEZ-FRAGA P.A. Firm/Company 2100 SALZEDO STREET, SUITE 300 Address CORAL GABLES, FL 33134 City/State and Zip Code LAURA@ARAZOZA.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: LAURA KOHN Name of Person 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 Tallahassec, Florida 32314 Tallabassee, Plocida 32301 Enclosed is a check for the following amount: 🗷 \$30 Filing Fee & S25 Filing For S55 Filing Fee & S60 Filing Fee. Certificate of Status Certificate of Status & Certified Copy Certified Copy

_____H17000042995_3____

	STATEMENT OF CORRECTION FOR	
	FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY	
ursuant to se	ection 605.0209, F.S., this document is being submitted to correct a previously filed document. Harme of the limited liability company is: LUSHLIFE COMMERCIAL LLC	
ECOND:	The Florida Document number of the limited liability company is: L17000028296 Document to be corrected is: ARTICLES OF ORGANIZATION	
	(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT	
stater	ains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected ment are as follows: E ATTACHED DOCUMENT WITH CORRECTED STATEMENTS	
OR Was	defectively signed. The manner in which the document was defectively signed and the appropriate correction	on arc
		17 FE
OR The e	Signature of Authorized Representative Date Date	B ILA AM S
	ew registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must designation).	Sign
New Registers I hereby acceptorovisions of obligations of	ed <u>Acent's Signature, if changing Registered Agent:</u> Of the appointment as registered agent and agree to act in this capacity. I further agree to comply with the all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept my position as registered agent as provided for in Chapter 505, F.S. Or, if this document is being filed to make the limited liability company has been notified in w	erely
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	
R2E062 (9/15)		

--H17000042995 3

STATEMENT OF CORRECTION FOR FLORIDA LIMITED LIABILITY COMPANY

LUSHLIFE COMMERCIAL LLC Document Number: L17000028296

Due to an inadvertent error, In the Articles of Organization that were submitted for filing, the Principal Address and the Mailing Address for the Company, and the Address listed for each of the Managers for the business had an incorrect Postal Zip Code. The correct Zip Code for each of the addresses is as listed below:

Principal Address 15901 SW 242 STREET HOMESTEAD, FL 33031

Mailing Address LUSHLIFE COMMERCIAL LLC PO BOX 924890 HOMESTEAD, FL 33092

Authorized Person(s) Detail (Name & Address)

Title: Manager ALBERTO J. ARAZOZA 15901 SW 242 STREET HOMESTEAD, FL 33031

Title: Manager EDUARDO J. ARAZOZA 15901 SW 242 STREET HOMESTEAD, FL 33031

Title: Manager OREN KATTAN 15901 SW 242 STREET HOMESTEAD, FL 33031