

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet ((H170001671533)))

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(((H170001671533)))



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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : JP GLOBAL BUSINESS
Account Number : I20130000083
Phone : (305)359-3700
Fax Number : (786)217-1243

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

Email Address: mark@jpbusiness.com

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2017 JUN 26 AM 9:20

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
HABITAR DEVELOPMENT GROUP LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

JUN 27 2017

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COVER LETTER (((H170001671533)))

TO: Registration Section
Division of Corporations

SUBJECT: HABITAR DEVELOPMENT GROUP 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:

SONIA BOTERO

Name of Person

JP GLOBAL BUSINESS SOLUTIONS INC

Firm/Company

1395 BRICKELL AVENUE, STE 1380

Address

MIAMI, FL 33131

City/State and Zip Code

MASTER@JPGBUSINESS.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SONIA BOTERO

Name of Person

at (305) 359-3700

Area Code

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2601 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

CR2E062 (9/15)

(((H170001671533)))

STATEMENT OF CORRECTION (((4170000167153 3)))
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: HABITAR DEVELOPMENT GROUP LLC

SECOND: The Florida Document number of the limited liability company is: L17000084276

THIRD: Document to be corrected is: MANAGER'S NAME Articles of Organization

(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:

MGR- PEREZ, FELIPE F: Name should be corrected to: PEREZ, LUIS F

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.

[Signature]

Signature of Authorized Representative

Date

TALLAHASSEE FLORIDA
SECRETARY OF STATE

2017 JUN 26 AM 9:20

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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)

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