

L17000129808

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
TAMPA MD, LLC

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1801 North Highland Avenue  
Tampa, Florida 33602  
(813) 224-9255 [Phone]  
(813) 223-9620 [Fax]  
www.bushross.com

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ATTORNEYS AT LAW

Mailing Address:  
Post Office Box 3913  
Tampa, Florida 33601-3913

**TELECOPIER TRANSMITTAL COVER SHEET**

Number of Pages: 2 (excluding cover sheet)

**SUBJECT:** 2nd Statement of Correction (FL) - Tampa MD, LLC re Manager name

**DATE:** 7/21/2017

**TO:** FL DOC - LLC filings (Business Fax)

**COMPANY:** \_\_\_\_\_

**PHONE #:** \_\_\_\_\_

**FAX #:** +1 (850) 617-6383

**FROM:** **Brenda K. Holland,**  
**bholland@bushross.com**

**TELEPHONE:** (813) 204-6440

**FAX:** (813) 223-9620

**COMMENTS:**  
2nd Statement of Correction (FL) - Tampa MD, LLC re Manager name

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**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: TAMPA MD, LLC

**SECOND:** The Florida Document number of the limited liability company is: L17000129808

**THIRD:** Document to be corrected is: STATEMENT OF CORRECTION FILED  
6/16/17

**(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:

The Statement of Correction filed on June 16, 2017 provides an incorrect statement, which is "The Initial Manager shall be Richard A. McGrath." This statement is incorrect because it contains the incorrect name of the manager.

The corrected statement is as follows: "The initial Manager shall be Richard Alan McGrath."

**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.

By: Jamie L. Meola JAMIE L. MEOLA, Authorized Representative July 21, 2017  
Signature of Authorized Representative Date

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

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