117000/68071

(Requestor's Name)				
(Address)				
(Address)				
(law see)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

Office Use Only



900312023789

04/18/18--01015--013 **30.00



~ **QULKER** 20 2018

COVER LETTER

	tion Section of Corporations				
Fos	stering Opportunity LLC				
302g2011	Name of Limited Liability Company				
Dear Sir or Mada	m:				
The enclosed State	ement of Correction and fee(s) a	are submitted for filing.			
Please return all co	orrespondence concerning this r	natter to the following:			
Ryan James (Carpenter				
	Name of Person	- A Service of the Se			
Fostering Opp	portunity LLC				
	Firm/Company				
1209 Tuxford	Drive				
	Address				
Brandon / FL	33511				
	City/State and Zip Code				
ryanjamescarj	penter@icloud.com				
E-mail addre	ss: (to be used for future annual	report notification)			
For further information	ation concerning this matter, ple	ease call:			
Ryan James C	Carpenter	813 .	504-6741		
1	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		ር የ	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Callahassee, Florida 32314		
Enclosed is a chec	k for the following amount:				
S25 Filing Fee	\$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy		
CR2E062 (9/15)					

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: _____ Fostering Opportunity LLC The Florida Document number of the limited liability company is: L17000168071 SECOND: Document to be corrected is:______Articles of Organization in FL for an LLC THIRD: (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT X Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: The current email address recorded is no longer available due to the account being "hacked" and the only protection offered by Google Mail was to lock the account. Please replace all email addresses with: RyanJamesCarpenter@lcloud.com 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 of Authorized Representative 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. egistered Agent's Signature Filing Fee: \$25.00

Certified Copy:

\$30.00 (optional)