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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Prodigy Data Management 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:

Carrie Gilbert

Name of Person

Gutta, Sharfi, & Co.

Firm/Company

490 Sawgrass Corp Pkwy. #310

Address

Sunrise, FL 33325

City/State and Zip Code

cgilbert@gscpaus.com

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

For further information concerning this matter, please call:

Carrie Gilbert

Name of Person

STREET/COURIER ADDRESS:

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

Enclosed is a check for the following amount:

S25 Filing Fee

S30 Filing Fee & Certificate of Status

S55 Filing Fee & Certified Copy S60 Filing Fee, Certificate of Status & Certified Copy

803-1751

MAILING ADDRESS:

Division of Corporations

Tallahassee, Florida 32314

Registration Section

P.O. Box 6327

Daytime Telephone Number

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: Prodigy Data Management, LLC

<u>SECOND:</u>	The Florida Document number of the limited liability company is: L18000020840
THIRD:	Document to be corrected is: 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:

The name of the LLC is currently misspelled. The incorrect spelling is Mangement

and the correct full name of the LLC is: Prodigy Data Management, LLC.

It is a typographical error.

<u>OR</u>	
Was defectively signed. The manner in which the document was defectively as follows:	y signed and the appropriate confection are

<u> OR</u>

 \Box

The electronic transmission of the record was defective.

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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.

Registered Agent's Signature

Filing Fee: Certified Copy: \$25.00 \$30.00 (optional)