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HARRIS

COVER LETTER

TO: Registration Division o	on Section f Corporations		
SUBJECT: 16	0 SW KLEE C	IR, LLC	
	N	Name of Limited Liability	Company
Dear Sir or Madam	:		
The enclosed Stater	nent of Correction and fee(s) a	re submitted for filing.	
Please return all con	respondence concerning this m	natter to the following:	
Sandra Z	Z. Green, Esq.		
· .	Name of Person		
JONATHAN	H. GREEN & ASSO	CIATES, P.A.	
	Firm/Company		
800 Brick	kell Avenue Sι	uite 1400	
	Address		
Miami, F	lorida 33131		
	City/State and Zip Code		
szg@jhg	law.com		
E-mail addres	s: (to be used for future annual	report notification)	
For further informa	tion concerning this matter, ple	ease call:	
Sandra Z	Z. Green	_{at (} 305)	372-5100
N	ame of Person	Area Code	Daytime Telephone Number
STREET/COURII Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, Florida	n ations ater Circle	Re Dir P.C	AILING ADDRESS: gistration Section vision of Corporations D. Box 6327 llahassee, Florida 32314
Enclosed is a checl	k for the following amount:		
\$25 Filing Fee	S30 Filing Fee & Certificate of Status	\$55 Filing Fee & Certified Copy	S60 Filing Fee, Certificate of Status & Certified Copy
CDaro(a (0/15)			

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: 160	SW KLEE CIR, LLC					
SECO!	ND: The Florida Document number of the limits Document to be corrected is: Articles	ed liability company is: L18000029245 of Organization dated 020120	118				
	(CHECK THE APPROPRIATE BOX AND	COMPLETE THE APPLICABLE STATEM	<u>IENT</u>				
x	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:						
	Incorrect Statement: MGR: N&						
	Why Incorrect: the MGR listed	is incorrect.					
	Corrected Statement: MGR: Rich Family Holdings, LLLP						
	<u>OR</u>						
	Was defectively signed. The manner in which the cas follows:	document was defectively signed and the appropr	riate correction are				
	OR OR		P 17				
	The electronic transmission of the record was defec	tive.	i w				
		02732018					
	Signature of Authorized Representative	Date					
	are of new registered agent, if applicable: (NOTE: if ng the designation).	correcting the registered agent, the new registere	d agent must sign				
I hereb provisi obligat	egistered Agent's Signature, if changing Registered Ay accept the appointment as registered agent and agrows of all statutes relative to the proper and complete ions of my position as registered agent as provided for a change in the registered office address, I hereby cochange.	ree to act in this capacity. I further agree to comp e performance of my duties, and I am familiar wit or in Chapter 605, F.S. Or, if this document is be	th and accept the ing filed to merely				
	Registered Agent's Signature						
	Filing Fee: Certified Copy:	\$25.00 \$30.00 (optional)					