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SECRETARY OF STATE DIVISION OF CORPORATIONS

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COVER LETTER

TO: Registration Sec Division of Corp				
SUBJECT:	New Seeson	Mores, PLL		
	IN a	ame of Limited Liability	Company	
Dear Sir or Madam:				
The enclosed Statement of	of Correction and fee(s) are	e submitted for filing.		
Please return all correspond	ndence concerning this ma	atter to the following:		
Jaggorl	ix toledo			
Berkshiri H	Name of Person Like Lay Home	Services		
19102 Wild Dancer St.				
	Address			
Lulz, FL 33 558				
	ty/State and Zip Code			
to ledo a fan parealty. Con E-mail address: (to be used for future annual report notification)				
E man address (to		eport notmount,		
For further information concerning this matter, please call:				
Jagueline!	Toledo	at (813)	810-5794 Daytime Telephone Number	
Name o	f Person	Area Code	Daytime Telephone Number	
STREET/COURIER AI Registration Section	DDRESS:		AILING ADDRESS: gistration Section	
Division of Corporations		Div	Division of Corporations	
Clifton Building 2661 Executive Center C Tallahassee, Florida 3230). Box 6327 lahassee, Florida 32314	
Enclosed is a check for	the following amount:			
\$25 Filing Fee	\$30 Filing Fee & Certificate of Status	\$55 Filing Fee & Certified Copy	S60 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. New Season Homes, PLLC **FIRST**: The name of the limited liability company is: **SECOND:** The Florida Document number of the limited liability companyris: THIRD: <u>PPROPRIATE BOX AND COMPLETE</u> THE APPLICABLE STATEMENT \square Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: 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. Registered Agent's Signature

Filing Fee:

Certified Copy:

\$25.00

\$30.00 (optional)