

L18000090258

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



PICK-UP



WAIT



MAIL

(Business Entity Name)

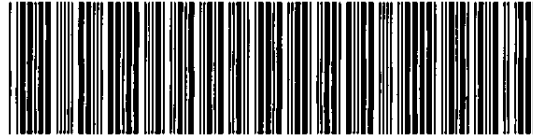
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19 APR 19 AM 6:19

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SECRETARY OF STATE
DIVISION OF CORPORATIONS

B FIGUEROA

APR 20 2018

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Evergreen Investment Realty Orlando, 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:

LaVerne Cox

Name of Person

Evergreen Investment Realty Corporation

Firm/Company

4700 Millenia Blvd, Suite 175

Address

Orlando, FL 32839

City/State and Zip Code

FLaccounts@evergreenir.com

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

For further information concerning this matter, please call:

LaVerne Cox

Name of Person

678

Area Code

3984004

Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$30 Filing Fee &
Certificate of Status

☐ \$55 Filing Fee &
Certified Copy

☒ \$60 Filing Fee,
Certificate of Status &
Certified Copy

**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: _____

Evergreen Investment Realty Orlando, LLC

SECOND: The Florida Document number of the limited liability company is: **L18000090258**

THIRD: Document to be corrected is: **Articles of Orgnaizations**

(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 physical and mailing address is incorrect because the vendor assured me that it would be approved prior to my filing. I was

notified that I was denied the location without reason on April 17th, 2018. The submitted address was

2750 Taylor Aveneue, #14, Orlando, FL 32806. New Physical and mailing address is

4700 Millenia Blvd., Suite 175, Orlando, FL 32839

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.

LaVerne Cox



4/18/2018

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

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