

12/04/2018 12:16 FAX

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GUNSTER-YOAKLEY

2001/002

L18000150992

12/4/2018

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6383

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Account Name : GUNSTER, YOAKLEY & STEWART, P.A.  
Account Number : 076117000420  
Phone : (561)650-0728  
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Email Address: atzancetatos@gunster.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
3959 PROPERTY HOLDINGS LLC

|                       |         |
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FAX AUDIT NUMBER  
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**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: 3959 PROPERTY HOLDINGS LLC

**SECOND:** The Florida Document number of the limited liability company is: L18000150992

**THIRD:** Document to be corrected is: AMENDMENT OF ARTICLES

**(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:

Page No 3 of FAX AUDIT NUMBER H18000341403 3 should say  
MGR - ANGEL RENNA - 1540 SW 155TH AVE, WESTON, FL 33326  
REMOVED, therefore he should be removed from the Screen Report

**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      November 30, 2018      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)

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