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COVER LETTER

TO: Registration Section

Division of C	orporations						
		REEZEZ LLC					
SUBJECT:	Name of Limited Liability Company						
Dear Sir or Madam:							
The enclosed Statemen	nt of Correction and fee(s) as	re submitted for filing	,				
Please return all corres	spondence concerning this m	natter to the following	;				
ST	EVEN C ANDERSEN	1					
	Name of Person						
	BREEZEZ LLC						
	Firm/Company						
1202 F	RUSHGROVE CIRCL	E					
	Address						
DC	OVER, FL 33527						
	City/State and Zip Code						
SAND	ERSEN10@GMAIL.C	ОМ					
E-mail address:	to be used for future annual	report notification)	•				
For further informatio	n concerning this matter, ple	ease call:					
STEVEN	C ANDERSEN	813	748-2613				
Nan	e of Person	at (at Code	Daytime Telephone Number				
STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Cente Tallahassee, Florida 3	ons r Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is a check f	or 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				
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.

		Filing Fee: Certified Copy:	\$25.00 \$30.00 (optional)			
		Registered Age	nt's Signature	_		
New R I hereb provisi obligat reflect	ng the designation). egistered Agent's Signature, y accept the appointment as ons of all statutes relative to ions of my position as regist	it changing Registered Agent: registered agent and agree to a the proper and complete performed agent as provided for in C ffice address, I hereby confirm to	wt in this capacity. I further ay rmance of my duties, and I am hapter 605, F.S. Or, if this doc that the limited liability compa	gree to comply with the familiar with and accept the ument is being filed to merely		
Signati	•	thorized Representative if applicable :(NOTE: if correct				
		n of the record was defective.	<u>2</u>	<u></u>		
	<u>OR</u>			<u>.</u>		
	Was defectively signed. T as follows:	he manner in which the docume	ent was defectively signed and	the appropriate contection are		
	<u>OR</u>			-15 -15		
				<u></u>		
	Article V should read	Title MGR, Steven C An	dersen for name	10.2 20.3 20.3		
	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: Article V Title MGR, Steven C Anderssen last name was spelled incorrectly.					
	(CHECK THE APP	ROPRIATE BOX AND COM	IPLETE THE APPLICABLE	E STATEMENT		
<u>THIRI</u>	<u>)</u> : Document to be co	Electronic Article prrected is:	es of Organization for Fl			
SECO!	ND: The Florida Docur	ment number of the limited liab	ility company is:			
<u>FIRST</u>	: The name of the limited lia	bility company is:				
			BREEZEZ LLC			

Electronic Articles of Organization For Florida Limited Liability Company

L18000190867 FILED 8:00 AM August 09, 2018 Sec. Of State cmwood

Article I

The name of the Limited Liability Company is: BREEZEZ LLC

Article II

The street address of the principal office of the Limited Liability Company is:

1202 RUSHGROVE CIRCLE DOVER, FL. 33527

The mailing address of the Limited Liability Company is:

1202 RUSHGROVE CIRCLE DOVER, FL. 33527

Article III

Other provisions, if any:

ANY AND ALL LAWFUL BUSINESS

Article IV

The name and Florida street address of the registered agent is:

STEVEN C ANDERSEN 1202 RUSHGROVE CIRCLE DOVER, FL. 33527

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: STEVEN C ANDERSEN

Article V

The name and address of person(s) authorized to manage LLC:

Title: MGR STEVEN CANDERSSEN SPECIED TO CORRECTE 1202 RUSHGROVE CIRCLE DOVER, FL. 33527 US L18000190867 FILED 8:00 AM August 09, 2018 Sec. Of State

Article VI

The effective date for this Limited Liability Company shall be:

08/09/2018

Signature of member or an authorized representative

Electronic Signature: STEVEN C ANDERSEN

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.