

Division of Corporations

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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000364496 3)))



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To:

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

From:

Account Name : FISHER, TOUSEY, LEAS & BALL
Account Number : I19990000021
Phone : (904) 356-2600
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FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FL

2018 DEC 27 PM 3:00

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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
BUTLER FAMILY PROPERTIES, LLC**

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 01 |
| Estimated Charge | \$25.00 |

S. PRATHEP

Note: Statement of Correction is being filed for
Arthur C. & Doris G. Butler Family Limited Partnership
to change the effective date to 11/1/19

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H18000364496

**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: Butler Family Properties, LLC

SECOND: The Florida Document number of the limited liability company is: L18000278508

THIRD: Document to be corrected is: Articles of Organization

(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:

Article V should have stated:

The effective date for these articles will be January 1, 2019.

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.

Marvin C. Ullery
Signature of Authorized Representative

12-27-18
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

H18000364496

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

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 2018 DEC 27 PM 3:00
 TALLAHASSEE FL
 CLERK OF CIRCUIT COURT