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C. GOLDEN MAR 1 1 2019

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: OFD ONE, LLC		
	lame of Limited Liabilit	y Company
Dear Sir or Madam:		
The enclosed Statement of Correction and fee(s) a	re submitted for filing.	
Please return all correspondence concerning this m	natter to the following:	
John E. Carter		
Name of Person		
OFD ONE, LLC		
Firm/Company		
2161 Palm Beach Lakes Blvd, S	uite 104	
Address	 	
West Palm Beach, FL	33409	
City/State and Zip Code		
john@carterlawfirm.us		
E-mail address: (to be used for future annual	report notification)	
For further information concerning this matter, ple	ease call:	
John E. Carter	561	368-9900
Name of Person	Area Code	Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Ro Di P.	AILING ADDRESS: egistration Section evision of Corporations O. Box 6327 ellahassee, Florida 32314
Enclosed is a check for the following amount:		
\$25 Filing Fee \$\times \$30 Filing Fee & Certificate of Status	\$55 Filing Fee & Certified Copy	S60 Filing Fee, Certificate of Status & Certified Copy

STATEMENT OF CORRECTION **FOR** FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY FILED

Pursuan	t to section 605.0209, F.S., this document is being submitted to correct a previously filed doc2014917EB 26 AH 9: 17
FIRST:	The name of the limited liability company is: OFD ONE, LLC
	MELAHASSEE, FL
SECON	
THIRD	High Afficiacy of Circumstation
,	(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 document which was created and filed by me, John E. Carter,
	incorrectly listed the Registered Agent, who is Christopher Sellitti, as the
	Authorized Representative. The Authorized Representative in fact is John E. Carter.
	<u>OR</u>
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:
	<u>OR</u>
	Signature of Authorized Representative
	re of new registered agent, if applicable : (NOTE: if correcting the registered agent, the new registered agent must sign agent designation).
I hereby provisio obligati	gistered Agent's Signature, if changing Registered Agent: accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ins of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the cons of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely change in the registered office address, I hereby confirm that the limited liability company has been notified in writing hange.
	Registered Agent's Signature

Filing Fee:

Certified Copy:

\$25.00 \$30.00 (optional)