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MAR 2 9 2019 S. YOUNG

COVER LETTER

Division of Corp				
SUBJECT: BILLA DESIGNS CCC. 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:				
	D. Bilko			
<u>Bilka</u>	Destany, LL Firm/Company			
Coll Porte Vedra Lakes Blvd. #3565				
Ponte Leader Beach Fl 32082 City/State and Zip/Code				
Bradley bilka egm on il com E-mail address: (to be used for fluture annual report notification)				
For further information concerning this matter, please call:				
Bradley D.	Bilka	ar 949	607-6983 Daytime Telephone Number	
Name of	Person	Area Code	Daytime Telephone Number	
STREET/COURIER AT Registration Section Division of Corporations Clifton Building 2661 Executive Center Ci Tallahassee, Florida 3230	rcle	Re Di P.	AILING ADDRESS: egistration Section vision of Corporations O. Box 6327 dlahassee, 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	

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. FIRST: The name of the limited liability company is: 900004 The Florida Document number of the limited liability company is: \(\begin{align*}
\text{U} & \text{ SECOND: Document to be corrected is: THIRD: (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: <u>or</u> \Box Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: 9 OR П The electronic transmission of the record was defective. 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 bereby confirm that the limited liability company has been notified in writing of this change. Registered Agent's Signature

Filing Fee:

Certified Copy:

\$25.00

\$30.00 (optional)

CR2E062 (9/15)