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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Abilio Perez Service (Name of Limited Liabili	S. Repair LLC ty 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:	
Abilio Perez Name of Person Abilio Perez Service & Repair LL Firm/Company	<u>`</u>
9201 Sw 20th St.	
City/State and Zip Code Abilo Plot @ 9 MAL. Comparing address: (to be used for future annual report notification)	oal
For further information concerning this matter, please call: Abilio Perez at (305 Name of Person Area Code) 8153709 Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following amount:	
\$30 Filing Fee & S30 Filing Fee & Certificate of Status Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant	t to section 605.0209, F.S., this document is being submitted to correct a previously filed document. The name of the limited liability company is: Abilio Perez Serviced Repair LLC
riksi.	The name of the named habitity company is. 7 10 1110 1 200 200 200 200 200 200 200 2
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	(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT
12	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: Add Abilio Perez Os Person Outhorized to manage LLL with title "MGR".
0	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:
	<u>OR</u> ○
	The electronic transmission of the record was defective. Color
	ire of new registered agent, if applicable : (NOTE: if correcting the registered agent, the new registered agent must signing the designation).
I hereb	egistered Agent's Signature, if changing Registered Agent: y accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the ions of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing change. Registered Agent's Signature Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)