

L1900023778

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : SORSHER & ASSOCIATES, LLC.
Account Number : I20170000056
Phone : (954)842-2931
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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.****

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
KOLLEKTIV TURMSTRASSE, L.L.C.**

Certificate of Status	0
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Page Count	03
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2019 OCT 9 PM 3:12

2019 OCT -9 PM 4:15

OCT 09 2019

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: KOLLEKTIV TURMSTRASSE, L.L.C.

SECOND: The Florida Document number of the limited liability company is: L19000237778

THIRD: Document to be corrected is: ARTICLES OF ORGANIZATION

CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT

[X] Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

FIRST NAME OF REGISTERED AGENT AND AMBR HAS TYPO
PLEASE CORRECT: ANDREAS KOZLOVS
TO: ANDREJS KOZLOVS

OR

[] Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

[Blank lines for defectively signed details]

OR

[] 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 hereby confirm that the limited liability company has been notified in writing of this change.

A. Kozlovs
Registered Agent's Signature

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