Division of Corporations

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Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)694-1639

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2019 DEC 10 PM

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

| Pursuar<br>FIRST   | nt to section 605.0209, F.S., the control of the limited liab  | is document is being submitted ility company is:  | to correct a previously filed do   | cument.<br>CES, LLC   |  |  |  |  |  |
|--|--|---|--|---|--|--|--|--|--|
| SECO:  | ND: The Florida Docum  | The Florida Document number of the limited liability company is:  |  |   |  |  |  |  |  |
| THIRI  |  | Document to be corrected is:  |  |   |  |  |  |  |  |
|  | (CHECK THE APPE  | OPRIATE BOX AND COM   | PLETE THE APPLICABLE S   | TATEMENT  |  |  |  |  |  |
| 0  | Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the correct statement are as follows:   |   |  |   |  |  |  |  |  |
|  | The effective date of the Cer  | tificate of Conversion filing is: 1   | 2/29/2019  |   |  |  |  |  |  |
|  | <u>OR</u>  |   |  |   |  |  |  |  |  |
| <b></b>  | Was defectively signed. Thas follows:  | e manner in which the docume  | nt was defectively signed and the  | 2019  |  |  |  |  |  |
|  |  |   | ,  | 0   |  |  |  |  |  |
|  | <u>OR</u>  |   | E.F.CRID.  | A U   |  |  |  |  |  |
| <b>2</b>   | The electronic transmission  | of the record was defective.  |  | <b>.</b>  |  |  |  |  |  |
|  | - Cu   | Lauren Und<br>norized Representative  | erwood, Attorney-in-Fact Date  | 12/10/2019  |  |  |  |  |  |
| accepti<br>New R<br>I herel<br>provisi<br>obligat<br>reflect | are of new registered agent, it ing the designation).  Registered Agent's Signature, by accept the appointment as a discount of all statutes relative to those of my position as register. | applicable :( NOTE: if correct if changing Registered Agent: registered agent and agree to a the proper and complete performed agent as provided for in C | ing the registered agent, the new ct in this capacity. I further agreemance of my duties, and I am falapter 605, F.S. Or, if this document the limited liability company | e to comply with the<br>miliar with and accept th<br>ment is being filed to mer |  |  |  |  |  |
|  |  | Registered Age  | nt's Signature   |   |  |  |  |  |  |
|  |  | Filing Fee:<br>Certified Copy:  | \$25.00<br>\$30.00 (optional)  |   |  |  |  |  |  |