## 120000105820

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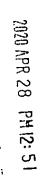
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## **COVER LETTER**

Name of Limited Liability Company

INVESTMENTS, LLC

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:
MARC L. VOLTATRE  Name of Person
VOLTAIRE CAPITAL INVESTMENTS, LLC
6443NW 78TH Drive
PARKLAND, EL 33067 City/State and Zip Code
E-mail address: (to be used to) future annual report notification)
For further information concerning this matter, please call:
MARC L. VOLTAIRE at 305, 457-9564
Name of Person Area Code Daytime Telephone Number

## Enclosed is a check for the following amount:

Mailing Address:

P.O. Box 6327

Registration Section
Division of Corporations

Tallahassee, FL 32314

\$25 Filing Fee \$30 Filing Fee &

Certificate of Status

□\$55 Filing Fee & Certified Copy

☐ \$60 Filing Fee.
Certificate of Status &
Certified Copy

**Street Address:** 

Registration Section

**Division of Corporations** 

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

TO:

Registration Section
Division of Corporations

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

	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: <u>VOLTATRE CARTTAL TAVESTAEN</u> TS, L.C.
SECON	D: The Florida Document number of the limited liability company is: <u>L20000 105820</u>
THIRD:	Document to be corrected is: ARTICLES of Diganization and Centificate
,	(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:
	Both articles of organization and Certificate are
	while the correct effective date of 4/20/2020
	OR
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:
	2021
	P
•	28
	OR
	The electronic transmission of the record was defective.
	Signature of Authorized Representative Date
	of new registered agent, if applicable :( NOTE: if correcting the registered agent, the new registered agent must sign the designation).
l hereby provision obligatio	distered 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 as of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the as 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 ange.
	Registered Agent's Signature

Filing Fee: Certified Copy:

\$25,00

\$30,00 (optional)