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		<u> </u>
(Re	questor's Name)	
(Ad	dress)	
(,	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	
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Office Use Only



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COVER LETTER

	gistration Section vision of Corporations	
SUBJECT:	Davis Mobile Home Park, LLC	
SUBJECT:	Name of Limited Liab	pility Company
Dear Sir or l	Madam:	
The enclose	d Statement of Correction and fee(s) are submitted for filin	g.
Please return	n all correspondence concerning this matter to the followin	g:
Renee Marq	quis-Abrams	
	Name of Person	-
Neill Griffir	n Marquis, PLLC	
	Firm/Company	-
P.O. Box 12	270	
	Address	_
Fort Pierce,	FL 34954	
	City/State and Zip Code	- ;
bkd1977@y	vahoo.com	
E-mail	address: (to be used for future annual report notification)	_
ror turther i	information concerning this matter, please call:	
Renee Marq	quis-Abrams 772	464-8200 _)
	Name of Person Area Code	Daytime Telephone Number
Re Di	niling Address: egistration Section vision of Corporations	Street Address: Registration Section Division of Corporations
	O. Box 6327 llahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810
14	いいいいりつしょ しし フムブエブ	ETIZIN MONIOCONOCE JUNE 010

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

Tallahassee, FL 32303

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

		ection 605.0209, F.S., this document is being submitted to correct a previously filed doc name of the limited liability company is: Davis Mobile Home Park, LLC	ument.						
	•								
SECO:	ND:								
THIRI	<u>Q</u> :	Document to be corrected is: Articles of Organization							
		(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE ST	<u> </u>						
ज		ains an incorrect statement. The incorrect statement, the reason the statement is incorrect ment are as follows:	ct, and the correc	cted					
	The address of the principal office of the company and the office of the registered agent is incorrect, because the								
	zip co	zip code is not 32960. The correct address of the principal office is 7200 84th Avenue, Vero Beach, Florida 32967,							
	and ti	the correct address of the office of the registered agent is 7200 84th Avenue, Vero Beach, Florida 32967.							
	OR			_					
		defectively signed. The manner in which the document was defectively signed and the llows:	appropriate corre	ection are					
	<u>OR</u>								
	The e	electronic transmission of the record was defective.		7-1-1-1 7-1-1-1					
		1L M2 813	19070						
		Signature of Authorized Representative Date	*						
		new registered agent, if applicable :(NOTE: if correcting the registered agent, the new redesignation).	egistered agent n	nust sign					
New Re	egister	ed Agent's Signature, if changing Registered Agent:							
l hereb provisio obligati	y accep ons of c ions of a chang	pt the appointment as registered agent and agree to act in this capacity. I further agree all statutes relative to the proper and complete performance of my duties, and I am fami my position as registered agent as provided for in Chapter 605, F.S. Or, if this docume ge in the registered office address, I hereby confirm that the limited liability company h	iliar with and accent is being filed t	cept the to merely					
		Registered Agent's Signature	_						

Filing Fee:

Certified Copy:

\$25.00

\$30.00 (optional)