# L20000326483

(Requestor's Name) (Address) (Address)	300354594673		
(City/State/Zip/Phone #)	11/09/2001015029 **25.00		
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	S TALIENT DEC 1 5 2020		
Office Use Only	Statement - WIL		

# **COVER LETTER**

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TO: Registration Section Division of Corporations

Shark Codst Estate Holdings, LLC
SUBJECT:

Name of Limited Liability 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:

William Meade

Name of Person

Shark Coast Estate Holdings, LLC

Firm/Company

2819 Bee Ridge Rd

Address

Sarasota, FL 34239

City/State and Zip Code

Wlhammna@live.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brian Palmer CPA		941 at (	922-4744
Na	me of Person	Area Code	Daytime Telephone Number
Mailing Ad	dress:		Street Address:
Registratio	on Section		Registration Section
Division c	of Corporations		Division of Corporations
P.O. Box	6327		The Centre of Tallahassee
Tallahasse	e, FL 32314		2415 N. Monroe Street, Suite 810
			Tallahassee, FL 32303
Enclosed is a check	for the following amount:		
■\$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	S60 Filing Fee. Certificate of Status &

Certified Copy

### 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: \_\_\_\_\_\_\_\_\_

	<u> </u>	-			
<u>SECOND:</u>	The Florida Doci	ument number of	the limited liabili	ty company is:	L20000326483

 Name
 Articles of Organization

 THIRD:
 Document to be corrected is:

## (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:

The name was erronously entered. The intended name of the LLC was

Shark Coast Real Estate Holdings, LLC

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

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<u>OR</u>		ۍ ۲	
The electronic transmission of the record was defective.		Ph	-
Wincher	11/1/20	<u>.</u> 	رہے۔ 
Signature of Authorized Representative	Date	6	

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.

Registered Agent's Signature

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