121000162050

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	: #)
	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use On	v

* 🗰 1



800365432648

RECEIVED

MAY 0 3 2021

05/04/21-+01023-+003 **25.00





COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: LITTLE ITALY INVEST USA 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:

Fabiana Ulla

Name of Person

Ocean Processing LLC

Firm/Company

2108 NE 123rd Street

Address

North Miami FL 33181

City/State and Zip Code

fabiana@oceanprocessing.info E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Fabiana Ulla

Name of Person

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

394-6814

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Daytime Telephone Number

021 HAY -1 PM 6: 09

Enclosed is a check for the following amount:

[™]S25 Filing Fee

□ \$30 Filing Fee & Certificate of Status □\$55 Filing Fee & □ Certified Copy

954

Area Code

at (

\$60 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: LITTLE ITALY INVEST USA LLC

SECOND: The Florida Document number of the limited liability company is: <u>1.21000162050</u>

THIRD: Document to be corrected is: Articles of Organization

(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:

First letter for Last name for members Dante Caballo and Gerardo Caballo are incorrect, last names were

misspelled, correct last names for Dante GABALLO and Gerardo GABALLO (initial letter is NOT C but G)

<u>OR</u>

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

		2021
OR		PH I
The electronic transmission of the record was defective.		
Signature of Authorized Representative	04-30-2021 " E 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:

<u>Thereby accept the appointment as registered agent and agree to act in this capacity.</u> 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. Thereby confirm that the limited liability company has been notified in writing of this change.

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