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COVER LETTER

TO: Registration Division of C				
CHAIN AND COM	n Investments, LLC			
JOBOLICI	Name of Limited Liability Company			
Dear Sir or Madam:				
The enclosed Stateme	nt of Correction and fee(s)	are submitted for filin	g.	
Please return all corre	spondence concerning this	matter to the followin	g:	
Robert Huffman				
	Name of Person		_	
Huffman Investments	, LLC			
	Firm/Company		-	
11100 Emuness Rd.				
	Address		_	
Jacksonville, FL 3221	8			
	City/State and Zip Code		-	
huff167@hotmail.com	١			
E-mail address: (to be used for future annua	l report notification)	_	
For further information	n concerning this matter, pl	ease call:		
Robert Huffman		904 at (563-6452	
Nam	e of Person	Area Code	Daytime Telephone Number	
P.O. Box 6	n Section Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
Enclosed is a check for	or 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	

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. <u>FIRST</u>: The name of the limited liability company is: <u>Huffman Investments</u> The Florida Document number of the limited liability company is: 12/000 20 76 SECOND: Document to be corrected is:____ THIRD: (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the correct statement are as follows: Article IV states that the tiotle for Robert HUffman is Pres and the title for Kimberly Huffman is VP Article IV should state that the title for Robert Huffman is Manager and the title for Kimberly Huffman is Member \mathbf{OR} Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are ◩ as follows: OR The electronic transmission of the record was defective. Ø

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:

Signature of Authorized Representative

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:

\$25.00

Certified Copy: \$30.00 (optional)