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2022 APR 14 AM 8: 4

g 5/21/2022

COVER LETTER

Division of (
Inspirati	ion Ocoee Development, LI	.C	
		pility Company	
Dear Sir or Madam:			
The enclosed Stateme	ent of Correction and fee(s)	are submitted for filin	g.
Please return all corre	spondence concerning this	matter to the followin	g:
Mary Merrell Bailey,	Esq.		
	Name of Person	<u> </u>	_
Your Caring Law Fir	m PLC		
	Firm/Company	•••	-
P. O. Box 520247			
	Address		-
Longwood, FL 3275	2		
	City/State and Zip Code		=
abhijitypatil@gmail.c	com		
E-mail address:	(to be used for future annua	l report notification)	-
For further informatic	on concerning this matter, pl	ease call:	
Vickie L. Parker		407 at (622-1900
Nan	ne of Person	Area Code	Daytime Telephone Number
P.O. Box 6	n Section f 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 f	or the following amount:		
□\$25 Filing Fee	☐ \$30 Filing Fee & Certificate of Status	Ø\$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee. Certificate of Status & Certified Copy

CR2E062 (9/15)

STATEMENT OF CORRECTION **FOR**

FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	nt to section 605,0209, F.S., this document is being submitted to correct a previously f					
FIRST	: The name of the limited liability company is: Inspiratin Ococe Development, LLC	2022 APR 14	AM 8:45 			
		SEO.	ULATE SZELFL			
SECO	ND: The Florida Document number of the limited liability company is: 1.210002	72709				
<u>THIRE</u>	ADTICLES OF OPGANIZATION					
	(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICA	BLE STATEMENT				
	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:					
	The wrong EIN was entered for the Company. The correct EIN is 87-1433505.					
			<u></u>			
	<u>OR</u>					
	Was defectively signed. The manner in which the document was defectively signed as follows:	and the appropriate cor	rection are			
						
	<u>OR</u>					
0	The electronic transmission of the record was defective.					
	A CARCOS	3/29/2022				
	Signature of Authorized Representative	Date	_			
_	re of new registered agent, if applicable :(NOTE: if correcting the registered agent, thing the designation).	ne new registered agent	must sign			
I hereby provisio obligati	egistered Agent's Signature, if changing Registered Agent: waccept the appointment as registered agent and agree to act in this capacity. I further ons of all statutes relative to the proper and complete performance of my duties, and I fons of my position as registered agent as provided for in Chapter 605, F.S. Or, if this a change in the registered office address, I hereby confirm that the limited liability contributes.	am familiar with and a document is being filed	accept the d to merely			
	Registered Agent's Signature					
	Filing Fee: \$25.00					

Certified Copy:

\$30.00 (optional)