## 121000470539

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## **COVER LETTER**

TO: Registration Division of 0	Section Corporations		
9065 H: SUBJECT:	amlin Road West, LLC		
30bite1	1	Name of Limited Liab	oility Company
Dear Sir or Madam:			
The enclosed Stateme	ent of Correction and fee(s) a	re submitted for filin	g.
Please return all corre	espondence concerning this t	natter to the following	ā:
Joseph L. Lindsay			
•	Name of Person	<del></del>	-
Lindsay Allen, PLLC			
	Firm/Company	<u>-</u>	-
13180 Livingston Ro	ad, Suite 206		
	Address		-
Naples, Florida 3410	9		
	City/State and Zip Code		-
Joe@naples.law			
E-mail address:	(to be used for future annua	l report notification)	_
For further information	on concerning this matter, pl	ease call:	
Joseph L. Lindsay		239 at (	593-7900
Nar	ne of Person	Area Code	Daytime Telephone Number
P.O. Box 6	on Section of 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 the following amount:		
区\$25 Filing Fee	☐ \$30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee. Certificate of Status & Certified Copy

CR2E062 (9/15)

TO:

## 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. 9065 Hamlin Road West, LLC **FIRST**: The name of the limited liability company is: L21000470539 The Florida Document number of the limited liability company is: SECOND: Document to be corrected is: Articles of Organization 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 corrected statement are as follows: MGR Nicola L Delgado Incorrect middle initial Nicola M Delgado <u>OR</u> 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. Signature of Authorized Representative 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: \$25.00

Certified Copy:

\$30.00 (optional)