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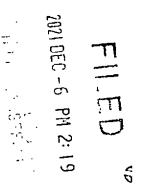
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C. BRUMBLEY

COVER LETTER

TO:	Registration S Division of Co						
SHRIF		anzas Road, LLC					
SOBSE	SUBJECT:Name of Limited Liability Company						
Dear Sir	r or Madam;						
The enc	losed Statemen	at of Correction and fee(s) a	re submitted for filin	ñ.			
Please r	eturn all corres	pondence concerning this r	natter to the following	g:			
Joseph	L. Lindsay						
		Name of Person		-			
Lindsay	Allen, PLLC						
		Firm/Company		-			
131801	Livingston Roa	d. Suite 206					
_	·	Address	<u> </u>	-			
Naples.	Florida 34109						
		City/State and Zip Code	·	-			
Joe@na	iples.law						
E-	mail address: (to be used for future annual	report notification)	_			
For furt	her information	concerning this matter, ple	case call:				
Joseph	L. Lindsay		239 at (593-7900			
	Name	e of Person	Area Code	Daytime Telephone Number			
	Mailing Addi Registration Division of P.O. Box 6. Tallahassee	n Section Corporations 327		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			
Enclose	ed is a check fo	r the following amount:					
□\$25 F	Filing Fee	☐ \$30 Filing Fee & Certificate of Status	□\$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

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document. 8101 Matanzas Road, LLC **FIRST**: The name of the limited liability company is: 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 C Delgado Incorrect middle initial Nicola M Delgado 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. 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)