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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : FISHER, TOUSEY, LEAS & BALL

Account Number : I19990000021 : (904)356-2600 Phone : (904)355-0233 Fax Number

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please: **

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CEDAR BOATS, LLC

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From Suzanne Wedekind

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COVER LETTER .

		stration Se sion of Co				
DE INTER	7484	Cados Bos	II.C		•	•
SUBJEC	.1:	Cedar Boa	N'	ame of Limited Liab	lity Company	
Dear Sir	or M	adam:				
The encl	osed	Statement	of Correction and fee(s) as	e submitted for filing	.	
Please re	turn	all corresp	ondence concerning this m	natter to the following	:	
<u>Marvín</u>	C K	locopel				
Maintail	<u> </u>	шеррег	Name of Person		•	
Fisher,	Tous	ey, Leas &	Ball Firm/Company			
			, ,			
501 Riv	ersid	e Avenue	Address			
Jackson	ville	Florida 33	2202 City/State and Zip Code		-	
corpfili E-	ngs@ mail	fishertous address: (t	ey.com o be used for future annual	report notification)	-	
For furi	her ir	iformation	concerning this matter, ple	ease call:		
Marvin	CK	loennel		at (904) 356-2600	
THE THE	<u> (). 1</u>		of Person	Area Code	Daytime Telephone Number	
	Rep Div P.C	ision of D. Box 63	Section Corporations		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 8 Tallahassee, FL 32303	0
Enclose	d is	a check fo	r the following amount:			
≘\$2 5 F	iling	Fee	S30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy	

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To: +18506176383

Charges More

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From: Suzanne Wedekind

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant	t to section 605.0209, F.S., this document is being subm	sitted to correct a previously filed document.				
FIRST:	The name of the limited liability company is: Cedar Bo	nts, LLC				
SECON	The Florida Document number of the limited l	iability company is: L22000049841				
THIRD	Document to be corrected is: Articles of Organ	zation				
	(CHECK THE APPROPRIATE BOX AND C	OMPLETE THE APPLICABLE STATEMENT				
	Contains an incorrect statement. The incorrect statement are as follows:	ent, the reason the statement is incorrect, and the corrected				
	Manager's Name ("Asad Antoine Awaijane") is misspelled. The correct spelling is: Assad Antoine Awaijane.					
	Frame of Registered Agent ("Fisher TTousey Leas & Ball, P.A.") is misspelled.					
	The correct spelling is: Fisher, Tousey, Leas & Ball, P.A.					
	<u>OR</u>					
	ument was defectively signed and the appropriate correction are					
		2				
		· · · · · · · · · · · · · · · · · · ·				
		- B -				
	<u>OR</u>	- i				
	The electronic fransinission of the record was defective					
		21(100/10)				
	Signature of Authorized Representative	Date				
	ire of new registered agent, if applicable :(NOTE: if coing the designation).	rrecting the registered agent, the new registered agent must sign				
I hereby provisio obligati	ons of all statutes relative to the proper and complete p- ions of my position as registered agent as provided for a change in the registered office address, I hereby confi	ent: to act in this capacity. I further agree to comply with the erformance of my duties, and I am familiar with and accept the in Chapter 605, F.S. Or, if this document is being filed to merely irm that the limited liability company has been notified in writing				
	Registered	Agent's Signature				
	Filing Fee: Certified Copy:	\$25.00 \$30.00 (optional)				