# L22000053183

(Requestor's Name)			
(Address)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:_	03/03/2022	
Name:	Merritt Walker	
	ence #: <b>1616231</b>	
Entity N	Name: HOFFNER CENTER H	OLDING, LLC
	Articles of Incorporation/Authorization to Transa	ct Business
	Amendment	
	Change of Agent	
	Reinstatement	
	Conversion	
	Merger	
	Dissolution/Withdrawal	
	Fictitious Name	
<b>✓</b>	Other Statement of Co	orrection
Authori	rized Amount: <b>\$25</b>	
Signatu	ture: <u>ww</u>	

F: •852.2682.9790



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Account#: 120000000088

Date:	03/03/2022	
Name:	Merritt Walker	
	e #:1616231	
Entity Nar	me: HOFFNER C	ENTER HOLDING, LLC
☐ Art	icles of Incorporation/Authorizati	on to Transact Business
An An	nendment	
☐ Ch	ange of Agent	
☐ Re	instatement	
☐ Co	nversion	
□ Ме	rger	
☐ Dis	solution/Withdrawal	
☐ Fic	titious Name	
<b>✓</b> Oth	nerSta	tement of Correction
Authorize	d Amount: <b>\$25</b>	
Signature	:mw	

# **COVER LETTER**

TO: Registration Division of	n Section Corporations		
Hoffne	er Center Holding, LLC		
30b3EC7		Name of Limited Liab	pility Company
Dear Sir or Madam:			
The enclosed Statem	ent of Correction and fee(s)	are submitted for filin	g.
Please return all corr	espondence concerning this i	natter to the followin	g:
Arturo Borges			
	Name of Person	-	_
Avanti Way Capital			
<del></del>	Firm/Company		-
382 NE 191st Street	. #46180		
	Address		_
Miami, FL 33179			
	City/State and Zip Code		_
arturo@avanitwayea	apital.com		
E-mail address	to be used for future annua	l report notification)	-
For further informati	on concerning this matter, pl	ease call:	
Arturo Borges		305	785-5594
Na	me of Person	at {at Code	Daytime Telephone Number
Division of P.O. Box	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:		
□\$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

Pursua	int to se	ction 605.0209, F.S., this document is being submitted to correct a previously filed document.	
FIRST	[:The n	Hoffner Center Holding, LLC usine of the limited liability company is:	
SECOND: The		The Florida Document number of the limited liability company is:  L22000053183	
		Document to be corrected is:	
		(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT	
×	Conta	gins an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected ment are as follows:	
	Pleas	se see attached Exhibit A, incorporated herein by reference.	
	-		
	OR	·	
	Was	defectively signed. The manner in which the document was defectively signed and the appropriate correction llows:	are
		2022	
	<u>or</u>		
П	The	electronic transmission of the record was defective.  UTA DEMOCRACY Signature of Authorized Representative  Date	
	7	Signature of Authorized Representative Date	
		new registered agent, if applicable: (NOTE: if correcting the registered agent, the new registered agent must si designation).	gn
I here provis obliga reflec	by acce tions of	ted Agent's Signature, if changing Registered Agent:  pt the appointment as registered agent and agree to act in this capacity. I further agree to comply with the all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the f my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to mer age in the registered office address. I hereby confirm that the limited liability company has been notified in write.	rely
		Registered Agent's Signature	
		Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	

# EXHIBIT A TO STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

## HOFFNER CENTER HOLDING, LLC

1. Incorrect Statement:

### Article III

The name and Florida street address of the registered agent is:

Arturo Borges 382 NE 191 Street, #46180 Miami, FL 33179

- (a) Reason that above statement is incorrect: The registered agent was incorrectly and erroneously stated on the limited liability company's Articles of Organization.
- 2. Corrected Statement:

## Article III

The name and Florida street address of the registered agent is:

Nelson Taracido 8400 NW 33<sup>rd</sup> Street, 104B Doral, FL 33122