L22000072136

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COVER LETTER

TO:	Registration S Division of Co					
SUBJE	13	863 S. Military L	LC			
	Name of Limited Liability Company					
Dear Si	ir or Madam:					
The end	closed Statemen	t of Correction and fee(s) a	re submitted for filing.			
Please 1	return all corresp	pondence concerning this n	natter to the following:			
Mic	hael Kar	sch				
		Name of Person				
Lori	um Law					
-		Firm/Company				
197	S. Feder	al Highway, Su	ite 200			
		Address				
Вос	a Raton,	FL 33432				
		City/State and Zip Code	_			
mka	rsch@lo	riumlaw.com				
E-	-mail address: (t	o be used for future annual	report notification)			
For furt	ther information	concerning this matter, ple	ase call:			
Mich	hael Kars	ch	561	361-1000		
	Name	of Person	Area Code	Daytime Telephone Number		
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		н Е Р	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclose	ed is a check fo	r the following amount:				
■ \$25	Filing Fee	S30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy		

22 SEB TO BH 2.1

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. FIRST: The name of the limited liability company is: __13863 S. Military LLC The Florida Document number of the limited liability company is: <u>L22000072136</u> SECOND: 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: Article IV-The LLC shall be managed by its Members not the Managers. May Shoemaker and Chad Shoemaker are not Managers. OR Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: <u>OR</u> П 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

\$25.00

\$30.00 (optional)

Filing Fee:

Certified Copy:

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