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2022 HAR -8 AM 9: 33 SECKEDING SESIATE

Cf. 3/11/2022

COVER LETTER

	egistration S ivision of Co			
SUBJECT	6304	4 20th St LL	С	
			Name of Limited Lia	bility Company
Dear Sir or	Madam:			
The enclose	ed Statemen	t of Correction and fee(s)	are submitted for filir	ng.
Please retui	rn all corres	oondence concerning this	matter to the followir	g:
Mich	aela F	- - - - - -	er	
<u></u>		Name of Person		_
		Firm/Company		_
1211	2 44th	<u>n A</u> ve W, Ur	nit 142	
		Address		_
3421	5 Cor	tez - FL		
	(Tity/State and Zip Code		_
info@)xxiv-	group.com		
E-mai	l address: (to	be used for future annua	report notification)	_
For further i	information	concerning this matter, pl	ease call:	
Micha	aela F	linterstoisse	er , 941	,6008418
	Name	of Person	Area Code	Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle				MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee. Florida 32314
	Florida 323			
		the following amount:		
■ \$25 Filin	g Fee	\$30 Filing Fee & Certificate of Status	S55 Filing Fee Certified Copy	& S60 Filing Fee, Certificate of Status & Certified Copy

CR2E062 (9/15)

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursua <u>FIRST</u>	it to section 605.0209, F.S., this document is being submitted to correct a previously filed document MAR -8 AM 9: 33 The name of the limited liability company is: 6304 20th St LLC SECRETARY OF STATE TALEAMASSEE, FL				
SECO THIRI	Articles of Organization				
	(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT				
ж	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:				
the name of the company is now:					
	LBK invest LLC				
	7901 4th St N STE 300, 33702 St. Petersburg, FL				
	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. OL/27/22 Signature of Authorized Representative Date				
Signatu acceptir	re of new registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must sign get the designation).				
l hereby provisio obligati	gistered Agent's Signature, if changing Registered Agent: accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ns of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the ons of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely change in the registered office address, I hereby confirm that the limited liability company has been notified in writing hange.				
	Registered Agent's Signature				

Filing Fee: Certified Copy:

\$25.00

\$30.00 (optional)