## 122000249053

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## **COVER LETTER**

ΓO: Registration Section Division of Corporations	
- LAYA ECONOMIC OPPORTUNITY ZONE BUS	SINESS LLC
Name of Limited Li	ability Company
Dear Sir or Madam:	
The enclosed Statement of Correction and fee(s) are submitted for fil	ing.
Please return all correspondence concerning this matter to the following	ng:
Katherine Jane Mercer	
Name of Person	_
LAYA ECONOMIC OPPORTUNITY ZONE BUSINESS LLC	
Firm/Company	<del>_</del>
4604 49TH ST N, SUITE 1211	
Address	
SAINT PETERSBURG, FL 33709	
City/State and Zip Code	_
JANE@MCMERCER.COM	
E-mail address: (to be used for future annual report notification	)
For further information concerning this matter, please call:	
KATHERINE JANE MERCER 727	410-1895
Name of Person Area Cod	e Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	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	

## 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: - LAYA ECONOMIC OPPORTUNITY ZONE BUSINESS LLC L22000249053 SECOND: The Florida Document number of the limited liability company is: Document to be corrected is:\_\_\_ THIRD: (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT  $\mathbf{Y}$ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: THE NAME OF THE BUSINESS HAS BEEN WRITTEN INCORRECTLY. IT HAS BEEN WRITTEN: - LAYA ECONOMIC OPPORTUNITY ZONE BUSINESS LLC. THE NAME SHOULD NOT HAVE SPACE OR HYPHENS AND SHOULD READ: LAYA ECONOMIC OPPORTUNITY ZONE BUSINESS LLC OR  $\Box$ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: OR  $\Box$ The electronic transmission of the record was defective. 06/20/202 Signature of Authorized Representative Date 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:

Certified Copy:

\$25.00

\$30.00 (optional)