Florida Department of State

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FOR DESCRIPTION OF THE PROPERTY OF

STATEMENT OF CORRECTION FOR FOR 2022 DEC 16 AH II: 27

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Conta stater	ains an incorrect statement. The incorrect statement, ment are as follows:	the reason the statement is incorrect, and the corrected
ART	ICLE IV: THE INCORRECT NAME OF THE MGR IS	MANUEL H. HERNANDEZ AND THE CORRECT
NAM	E OF THE MGR IS: MANUEL HERNANDEZ., AND	ALSO THE CORRECT NAME OF THE
AUT	HORIZED SIGNER IS MANUEL HERNANDEZ.	
<u>OR</u>		
	lectronic transmission of the record was defective.	
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The e	lectronic transmission of the record was defective. Signature of Allthorized Representative	
The expension of necessary Registere ereby acceptions of a ligations of lect a change	Signature of Allthorized Representative ew registered agent, if applicable: (NOTE: if corrective lesignation). A Agent's Signature, if changing Registered Agent: If the appointment as registered agent and agree to act the appointment as registered agent and complete perform the proper and complete perform position as registered agent as provided for in Chapter in the registered office address. I hereby confirm the	12/14/2037 Date ng the registered agent, the new registered agent must sign
The continue of no continue the	Signature of Allthorized Representative ew registered agent, if applicable: (NOTE: if corrective lesignation). A Agent's Signature, if changing Registered Agent: If the appointment as registered agent and agree to act the appointment as registered agent and complete perform the proper and complete perform position as registered agent as provided for in Chapter in the registered office address. I hereby confirm the	Date Date ng the registered agent, the new registered agent must sign in this capacity. I further agree to comply with the nance of my duties, and I am familiar with and accept the apter 605. F.S. Or, if this document is being filed to mere, at the limited liability company has been notified in writing