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S. FRANKLIN JUL 0 9 2023

COVER LETTER

TO:		istration S sion of Co	ection orporations			
SUBJE	CT·	CDRISC	Financial LLC			
3000	Name of Limited Liability Company					
Dear Si	r or M	ladam:				
The enc	losed	Statemen	t of Correction and fee(s) are submitted for filin	ng.	
Please r	eturn	all corres	pondence concerning th	is matter to the following	ng:	
Cory D	riscol	1				
			Name of Person		_	
CDRIS	C Fin	ancial LL	С			
			Firm/Company		_	
8825 Pe	erime	ter Park B	lvd. Suite 604			
			Address		_	
Jackson	wille,	FL 32216	5			
			City/State and Zip Code		_	
jeff.dris	scoll@	graymond	james.com			
E-	mail a	address: (t	o be used for future ann	nual report notification)	_	
For furtl	her in	formation	concerning this matter,	please cali:		
Jeff Dri	scoll			904 at (620-9993 (option 1)	
	_	Name	of Person	Area Code	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	
Enclose	d is a	check fo	r the following amoun	t:		
□\$25 F	iling	Fee	\$30 Filing Fee & Certificate of State	□\$55 Filing Fee & Certified Copy	□ \$60 Filing Fee, Certificate of Status & Certified Copy	

CR2E062 (9/15)

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: CDRISC Financial LLC SECOND: The Florida Document number of the limited liability company is: Document to be corrected is: _____Articles of Organization for Limited Liability Company 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: The effective date is incorrect. The Articles of Organization have the incorrect effective date (01/01/2023) The effective date should be corrected to the filing date 12/20/2022 The effective date for this Limited Liability Company shall be 12/20/2022. OR Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows: <u>OR</u> The electronic transmission of the record was defective. 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

> Filing Fee: Certified Copy:

\$25.00

\$30.00 (optional)





June 6, 2023

CORY DRISCOLL 8825 PERIMETER PARK BLVD STE 604 JACKSONVILLE, FL 32216 US

Ref. Number: L22000531216

We have received your document for and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The amendment application submitted is the wrong form. Please complete the attached Statement of Correction Application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Sharon D Franklin Regulatory Specialist II

RECEIVED

Letter Number: 423A00012791

JUN 2 8 2023