L23000410864

(Requestor's Name)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
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Certified Copies Certificates of Status					
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2023 OCT 17 PM 4: 42
THINGSEE FLORID

COVER LETTER

· TO: Registration Section Division of Corporations CLAB PROPERTIES AND IVNESTMENTS LLC SUBJECT: Name of Limited Liability Company Dear Sir or Madam: The enclosed Statement of Correction and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Hannah Amato Name of Person International Business Company Formation Firm/Company 407 N. Highland Ave. Address Nyack, NY, 10960 City/State and Zip Code compliance@ibcf.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Hannah Amato Daytime Telephone Number Name of Person Street Address: Mailing Address: Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Enclosed is a check for the following amount: □\$55 Filing Fee & ■\$25 Filing Fee ☐ \$30 Filing Fee & □ \$60 Filing Fee, Certificate of Status & Certificate of Status Certified Copy Certified Copy



October 9, 2023

HANNAH AMATO 407 N. HIGHLAND AVENUE NYACK, NY 10960

SUBJECT: CLAB PROPERTIES AND INVESTMENTS LLC

Ref. Number: L23000410864

We have received your document for CLAB PROPERTIES AND INVESTMENTS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the Limited Liability Company is not correct.

The document must be signed by a member or an authorized representative of a member.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Letter Number: 023A00023354

Neysa Culligan Regulatory Specialist III

www.sunbiz.org

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

		ction 605.0209, F.S., this document is being submittance of the limited liability company is: CLAB	tted to correct a previously filed documen PROPERTIES AND INVESTMENTS LLC		
111171	11101				
SECOND:		The Florida Document number of the limited lia			
THIRD:		Document to be corrected is:		-	
		(CHECK THE APPROPRIATE BOX AND CO	MPLETE THE APPLICABLE STATE	<u>EMENT</u>	
		nins an incorrect statement. The incorrect statemen ment are as follows:	t, the reason the statement is incorrect, an	d the corrected	
	The Member and Manager addresses were listed inadvertently incorrectly, the correct addresses are:				
	Member:CLAB INVEST LIMITED- Trident Chambers, Wickhams Cay I,Road Town, Tortola VG 1110 BVI				
	Manager:Caio Aleyr de Carvalho Silva- Rua B-11 Q. 4B L.10 Jardins Paris, GOIANIA, GO 74.885-634 Brazil				
		defectively signed. The manner in which the docur lows:	nent was defectively signed and the appro	opriate Original PM 1: 42	
. .	L	Signature of Authorized Representative	10/16/2	<u> 2023</u>	
		ew registered agent, if applicable :(NOTE: if corredesignation).	ecting the registered agent, the new registe	ered agent must sign	
Thereby provision	acce ons of ons of ons of chan	ed Agent's Signature, if changing Registered Agent of the appointment as registered agent and agree to all statutes relative to the proper and complete perfiny position as registered agent as provided for in age in the registered office address, I hereby confirm.) act in this capacity. I further agree to co formance of my duties, and I am familiar y Chapter 605, F.S. Or, if this document is	with and accept the being filed to merely	
		Registered Ag	gent's Signature		
		Filing Fee: Certified Copy:	\$25.00 \$30.00 (optional)		