123000435228

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					
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COVER LETTER

	gistration Section vision of Corpo			, ,			
end rect.		USTRIES LLC					
SUBJECT	Name of Limited Liability Company						
Dear Sir or	Madam:						
The enclose	ed Statement of	Correction and fee(s) a	re submitted for filing	g.			
Please retur	n all correspond	lence concerning this n	natter to the following	<u>z</u> :			
CARLOS (ОСНОА						
		Name of Person	· · · · · · · · · · · · · · · · · · ·	-			
COLON IN	IDUSTRIES LI	.c					
		Firm/Company		-			
713 COMN	ИERCE WAY #	29					
		Address		- ,			
JUPITER,	FL 33458						
	City	State and Zip Code		_			
ASH6344@	GMAIL.COM						
E-mai	l address: (to bo	used for future annual	report notification)				
For further	information cor	ncerning this matter, ple	ease call:				
CARLOS (ОСНОА		708 at (923-1813			
	Name of I	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			
Enclosed is	s a check for th	e following amount:					
■\$25 Filir	ng Fee 🗆	\$30 Filing Fee & Certificate of Status	☐\$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy			

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursua FIRS	int to sec <u>r</u> : The n	etion 605.0209, F.S., this document is being submitted to correct ame of the limited liability company is: COLON INDUSTRIES L	t a previously filed document. Aff				
SECOND: THIRD:		The Florida Document number of the limited liability company is: L23000435228 Document to be corrected is: ARTICLES OF ORGANIZATION					
		CHECK THE APPROPRIATE BOX AND COMPLETE T					
2	Conta staten	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: TILE: MEMBER OR MANAGER					
	REM	REMOVE CEO AS THE TITLE AND UPDATE TO MEMBER/MANAGER					
Ø	OR Was cas fol	defectively signed. The manner in which the document was defe lows:	ectively signed and the appropriate correction are				
	<u>OR</u>						
2		lectronic transmission of the record was defective.	10-18-2023				
		Signature of Authorized Representative	Date				
New I I here provis obliga- reflect	ting the e Registere by acceptions of e	ew registered agent, if applicable :(NOTE: if correcting the registered agent's Signature, if changing Registered Agent: of the appointment as registered agent and agree to act in this call statutes relative to the proper and complete performance of now position as registered agent as provided for in Chapter 605, age in the registered office address. I hereby confirm that the limit	ipacity. I further agree to comply with the ny duties, and I am familiar with and accept the F.S. Or, if this document is being filed to merely				

Registered Agent's Signature

\$25.00

\$30.00 (optional)

Filing Fee:

Certified Copy:

CR2E062 (9/15)