

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((11240004109883)))



H240004109983ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : KAUFFMAN THOMPSON, PLLC

Email Address:_____

Account Number : I20210000121 Phone : (941)479-3006 Fax Number : (941)777-4577

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
IFRCORF MANAGER LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

(((H24000410988 3)))

COVER LETTER

	istration Section ision of Corporations				
SUBJECT:	JEBCORE MANAGER, LLC				
30202011		Name of Limited Liab	pility Company		
Dear Sir or M	Aadam:				
The enclosed	Statement of Correction and fee(s)	are submitted for filin	g.		
Please return	all correspondence concerning this	matter to the followin	g:		
Gary Kauffr	nan, Esq.				
	Name of Person		_		
Kauffman T	hompson, PLLC				
	Firm/Company		_		
1990 Main S	Street, Suite 725				
	Address		<u>-</u>		
Sarasota, FL	34236				
	City/State and Zip Code		_		
s@omniumr	c.com				
E-mail	address: (to be used for future annua	report notification)	_		
For further in	formation concerning this matter, pl	ease call:			
Gary Kauffn	nan, Esq.	941 at (479-3006		
	Name of Person	Area Code	Daytime Telephone Number		
Reg Div P.C	ling Address: gistration Section rision of Corporations b. Box 6327 lahassee, 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:				
□S25 Filing	Fee S30 Filing Fee & Certificate of Status	☐\$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy		
CR2E062 (9/	15)				
(((H24000	410988 3)))				

(((H24000410988 3)))

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

			E MANAGER, LLC
SECO	OND:	The Florida Document number of the limited	liability company is:
THIRD: Document to be corrected is: Atticles of Organiza		Document to be corrected is:	ization
,			OMPLETE THE APPLICABLE STATEMENT
æ	Cont states	ains on incorrect statement. The incorrect statemement are as follows:	ent, the reason the statement is incorrect, and the corrected
	Anic		lanuary 1, 2025. The reason this statement is incorrect is
	that (accordingly, Article V is corrected to read that the Articles
	shall		il commence, upon filing of this Statement of Correction.
	<u>OR</u>		
	Was as fo	liows:	ament was defectively signed and the appropriate correction are
	<u>OR</u>	· · · · · · · · · · · · · · · · · · ·	
	The e	electronic antisimission of the record was defective	s.
		<u>Carlotte</u>	December 13, 2024
		Signature of Authorized Representative Gary Kadibnan	Date
Signat accept	ure of a	·	recting the registered agent, the new registered agent must sign
l herei provis obliga reflect	by acce, ions of tions of	all statutes relative to the proper and complete per I my position as registered agent as provided for in ige in the registered office address. Thereby confi-	nt; to act in this capacity. I further agree to comply with the rformance of my duties, and I am familiar with and accept the a Chapter 605, F.S. Or, if this document is being filed to merely am that the limited liability company has been notified in writing
		Registered A	gent's Signature
		Filing Fee: Cortified Copy:	\$25.00 \$30.00 (optional)