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 Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

W24000503854

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(((H24000409197 3)))



H240004091973ABC3

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To:
 Division of Corporations
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From:
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 Account Number : 07535000065
 Phone : (954)525-7500
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: CGC@TRIPPSCOTT.COM

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
 MR. GOLD CART AT AVENIR LLC**

Certificate of Status	0
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DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA

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((H24000409197 3)))

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: MR. GOLD CART AT AVENIR LLC

SECOND: The Florida Document number of the limited liability company is: L24000503854

THIRD: Document to be corrected is: ARTICLES OF ORGANIZATION

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:

DUE TO SCRIVENER'S ERROR, THE WORD "GOLD" IN THE ENTITY NAME SHOULD HAVE BEEN "GOLF". THE CORRECT NAME OF THE ENTITY IS MR. GOLF CART AT AVENIR LLC.

OR

Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

Blank lines for describing the manner of defective signing.

OR

The electronic transmission of the record was defective.

X

Handwritten signature of the authorized representative.

12/12/24

Signature of Authorized Representative

Date

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: \$25.00
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