

M140000007612

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TALLAHASSEE, FLORIDA

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T. HAMPTON

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Nacona-Henrietta Health Properties, LLC

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:

Kimberly D. Cheatwood

Name of Person

Paster, West & Kraner, p.c.

Firm/Company

138 N. Meramec Avenue

Address

Clayton, Missouri 63105

City/State and Zip Code

msw@pwklaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kimberly D. Cheatwood

at ( 314 ) 446-3436

Name of Person

Area Code

Daytime Telephone Number

### STREET/COURIER ADDRESS:

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

### MAILING ADDRESS:

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ☒ \$25 Filing Fee      ☐ \$30 Filing Fee & Certificate of Status      ☐ \$55 Filing Fee & Certified Copy      ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E062 (2/14)

# Paster, West & Kraner, p.c.

Attorneys At Law

Kimberly D. Cheatwood  
Legal Assistant  
E-mail: [kdc@pwklaw.com](mailto:kdc@pwklaw.com)

October 29, 2014

Florida Secretary of State  
Division of Corporations  
Registration Section  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

***Re: Statement of Correction for Florida or Florida Limited Liability Company***

To whom it may concern:

I am enclosing Statements of Correction for Florida or Florida Limited Liability Company for the following entities, which have been authorized to transact business in Florida:

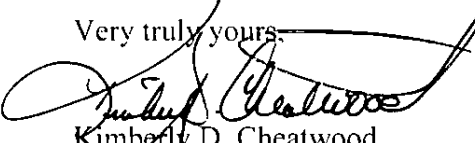
1. Nocona-Henrietta Health Properties, LLC, a Delaware limited liability company;
2. Nocona Nursing Home, LLC, a Delaware limited liability company; and
3. Seven Oaks Nursing Home, LLC, a Delaware limited liability company.

I am also enclosing this firm's check in the amount of \$75.00 in payment of the \$25.00 filing fee for each entity.

Once the applications have been filed, please return them to me at the address listed below.

If you have any questions, please do not hesitate to contact me.

Very truly yours,



Kimberly D. Cheatwood  
Legal Assistant

Enclosures

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**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: \_\_\_\_\_  
Nocona-Henrietta Health Properties, LLC

**SECOND:** The Florida Document number of the limited liability company is: M14000007612

**THIRD:** Document to be corrected is:  
Application by Foreign LLC for Authorization to Transact Business in FL

**(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:

A typo was made on the address of the principal office, the mailing address, the  
address of the person who has authority to manage and the registered agent.

The correct address is PMB 158, 5342 Clark Road, Sarasota, Florida 34233.

**OR**

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

**OR**

- ☐ The electronic transmission of the record was defective.

Signature of Authorized Representative

Hal C. Ball

October 27, 2014

Date

FILED  
14 NOV -4 AM 11:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)