

M1500004582

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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☐

MAIL

(Business Entity Name)

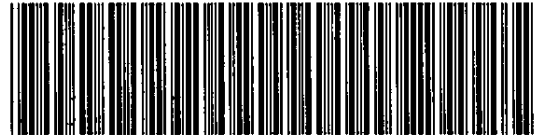
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAR 17 2016  
D. BRUCE

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ACJLP-FC, 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:

Suzanne Harrod

Name of Person

Sherman & Howard L.L.C.

Firm/Company

633 Seventeenth Street, Suite 3000

Address

Denver, Colorado 80202

City/State and Zip Code

sharrod@shermanhoward.com

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

For further information concerning this matter, please call:

Suzanne Harrod

Name of Person

at ( 303 ) 299-8133

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 (9/15)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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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: ACJLP-FC, LLC

**SECOND:** The Florida Document number of the limited liability company is: M15000004582

**THIRD:** Document to be corrected is: Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida

**(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:

The name of the foreign limited liability company was incorrectly stated in the Application by Foreign Limited Liability Company

For Authorization to Transact Business in Florida as ACJLP-FC, LLC. The correct name of the foreign limited liability company

is ACJLP-FL, LLC

**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.

Greg T. Dene  
Signature of Authorized Representative

3/11/16  
Date

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2016 MAR 16 A 10:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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  
Certified Copy: \$30.00 (optional)