

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

(((H17000162589 3)))

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To:  
Division of Corporations  
Fax Number : 1850617-6383

From:  
Account Name : DAVID J. WIENER, P.A.  
Account Number : 120040000023  
Phone : (561) 989-2911  
Fax Number : (561) 361-8898

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

Email Address: \_\_\_\_\_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
G&I IX FOUNTAINS CENTER LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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D. BRUCE  
JUN 20 2017

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Corporate Filing Menu

Help

## COVER LETTER

(((H17000162589 3)))

TO: Registration Section  
Division of CorporationsSUBJECT: G&I IX Fountains Center 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:

Indira Negron

Name of Person

DRA Advisors LLC

Firm/Company

220 East 42nd Street, 27th Floor

Address

New York, NY 10017

City/State and Zip Code

inegron@draadvisors.com

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

For further information concerning this matter, please call:

Indira Negron

Name of Person

at 212

Area Code

697-4740

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)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2017 JUN 19 A 10:20

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**STATEMENT OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

(((H17000162589 3)))

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: G&I IX Fountains Center LLC

**SECOND:** The Florida Document number of the limited liability company is: M17000003991

**THIRD:** Document to be corrected is: Application for Foreign Limited Liability Company

**(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, title or capacity and address of the person(s) who has authority to manage was listed as: Jason Borreo, VP,

c/o DRA Advisors LLC, 220 East 42nd St, 27th FL, NY, NY 10017 and should be changed to read as follows:

G&I IX Fountains of Boynton LLC, a Delaware limited liability company c/o DRA Advisors LLC, 220 East 42nd St, 27th FL, NY, NY 10017

**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

\_\_\_\_\_  
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  
Certified Copy: \$30.00 (optional)

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