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		Florida Department of State Division of Corporations		
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r	Ťo:	Division of Corporations Fax Number : (850)617-6383	- -	16 . ¹¹¹
	From:	Account Name : NASON, YEAGER, GERSON, WHITE & LIOCE, P.A. Account Number : 073222003555 Fhone : (561)686-3307 Fax Number : (561)290-1590		9 R 20 19
		er the email address for this business entity to be used for future annual report mailings. Suturionly use small address please.** Email Address: <u>AMSAACO AASAAJCAGPC.CAM</u>	اللہ اللہ اللہ اللہ اللہ اللہ اللہ اللہ	, L Ĕ
, 00	LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 660 PEACOCK BOULEVARD, LLC			
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	STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY			
Pursuani <u>FIRST</u> :	t to section 605.0209, F.S., this document is being submitted to correct a previously filed document. The name of the limited liability company is: 660 Peacock Boulevard, LLC			
<u>SECON</u> <u>THIRD</u>	Application for Authorization to Transact Business			
	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: The incorrect statement: Enterprise Drive Partners, LLC, Manager. The statement was made in error. The correct statement: Enterprise Drive Manager, LLC, Manager			
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:	с		
	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 chapter in the variety and office achieves a theorem. 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: Certified Copy:

\$25.00 \$30.00 (optional)