

M20000000 4236

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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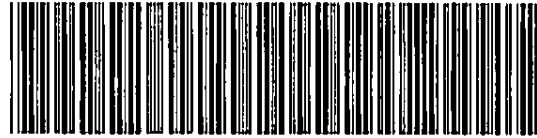
(Business Entity Name)

(Document Number)

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2020 MAY 18 AM 6:44

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
AT WASHINGTON, D.C.

JUN 09 2020

S. YOUNG



GALBUT WALTERS & ASSOCIATES

May 14, 2020

Division of Corporations
Registration Section
The Centre of Tallahassee
3415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Re: Filing of Statements of Correction
L & W ALF, LLC – M20000004236
15520 NW 2ND AVE, LLC – M20000004235
ASA OPCO MANAGEMENT, LLC – M20000004239

Dear Sir or Madam,

Enclosed please find three completed Statements of Correction, filed on behalf of L & W ALF, LLC, a Delaware limited liability company, 15520 NW 2ND AVE, LLC, a Delaware limited liability company, and ASA OPCO MANAGEMENT, LLC, a Delaware limited liability company. Each company has been authorized to transact business in Florida, and all three applications for authority contained the same misspelling of the name of one of the managers. I have also enclosed our checks for your fees in the amount of \$55.00 per company, and a return Fed Ex envelope.

Your assistance in completing this correction is greatly appreciated. Please contact me should there be anything further that you require.

Sincerely yours,
GALBUT WALTERS & ASSOCIATES, LLP



ALAN S. WALTERS, ESQ.

ASW:aw
Encl.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: L & W ALF, 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:

Alan S. Walters

Name of Person

Galbut, Walters & Associates, LLP

Firm/Company

4770 Biscayne Blvd., Ste 1400

Address

Miami, Florida 33137

City/State and Zip Code

awalters@galbutwalters.com

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

For further information concerning this matter, please call:

Alan S. Walters

786

245-2317

at (_____)

Name of Person

Area Code

Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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

**STATEMENT OF CORRECTION
TO
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY
FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA
OF
L & W ALF, LLC,
A Delaware Limited Liability Company**

Pursuant to section 605.0209, F.S., this document is being submitted to correct the Application By Foreign Limited Liability Company For Authorization To Transact Business In Florida.

FIRST: The name of the limited liability company is: **L & W ALF, LLC.**

SECOND: The Florida Document number of the limited liability company is **M20000004236.**

THIRD: The document to be corrected is the Application By Foreign Limited Liability Company For Authorization To Transact Business In Florida, filed May 1, 2020, which document contains one inaccurate statement.

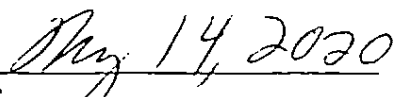
The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

Incorrect Statement: Statement 8 of the application states that the name of one of the Managers is Aryeh Seskin.

Reason: This statement was inaccurate when filed because the Manager's name was inadvertently misspelled.

Correct Statement: The Manager's name is Aryeh Soskin.


ALAN S. WALTERS, Authorized Representative


Date

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2020 MAY 18 AM 6:44
CLERK OF SUPERIOR COURT
JACKSONVILLE, FLORIDA