

**corrected; please honor
original submission date
of 1/16/24

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

**corrected; please honor
original submission date
of 1/16/24

Note: Please print this page and use it as a cover sheet. Type the fax audit number
(shown below) on the top and bottom of all pages of the document.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : CAPITOL SERVICES, INC.
Account Number : I20160000017
Phone : (855)498-5500
Fax Number : (800)432-3622

**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
US-STABLE-P2 15939 STATE ROAD 54 ODESSA, LLC

**corrected; please honor
original submission date
of 1/16/24

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$55.00

**corrected; please honor
original submission date
of 1/16/24

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY

JAN 18 2024

RECEIVED
2024 JAN 17 PM 3:50
DIVISION OF CORPORATIONS
FLORIDA

FILED
2024 JAN 16 PM 4:01
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: US-STABLE-P2 15939 State Road 54 Odessa, 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:

Megan Crowley

Name of Person

Stablewood Properties

Firm/Company

PO Box 1128

Address

Buda, TX 78610

City/State and Zip Code

megan.crowley@stablewoodproperties.com

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

For further information concerning this matter, please call:

Megan Crowley 480 329-7419

Name of Person at () Daytime Telephone Number
Area Code

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

H24000020924

**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: US-STABLE-P2 15939 State Road 54 Odessa, LLC

SECOND: The Florida Document number of the limited liability company is: 1124000002304

THIRD: Document to be corrected is: Foreign Qualification

(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:

When drafting the document, the name was meant to be "US-STABLE-P2 15945 State Road 54 Odessa, LLC"

however it was mistakenly typed in as "US-STABLE-P2 15939 State Road 54 Odessa, 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.

1/12/2024

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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Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT
COPY OF THE CERTIFICATE OF CORRECTION OF "US-STABLE-P2 15939
STATE ROAD 54 ODESSA, LLC", CHANGING ITS NAME FROM "US-STABLE-
P2 15939 STATE ROAD 54 ODESSA, LLC" TO "US-STABLE-P2 15945
STATE ROAD 54 ODESSA, LLC", FILED IN THIS OFFICE ON THE
ELEVENTH DAY OF JANUARY, A.D. 2024, AT 12:55 O'CLOCK P.M.

FILED
2024 JAN 16 PM 4:01
TALLAHASSEE, FLORIDA



Jeffrey W. Bullock
Jeffrey W. Bullock, Secretary of State

2891652 8100
SR# 20240096736

You may verify this certificate online at corp.delaware.gov/authver.shtml

Authentication: 202580377
Date: 01-11-24

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State of Delaware
Secretary of State
Division of Corporations
Delivered: 12:55 PM 01/11/2024
FILED 01:55 PM 01/11/2024
SN: 20240096734 - Filing Number: 2891482

STATE OF DELAWARE
CERTIFICATE OF CORRECTION
OF A LIMITED LIABILITY COMPANY

FILED
2024 JAN 16 PM 4:01
FALLMONT DEPT. OF STATE

The undersigned authorized person, hereby certifies as follows:

1. The name of the limited liability company is
US-STABLE-P2 15939 State Road 54 Odessa, LLC
2. A Certificate of Formation
was filed by the Secretary of State of Delaware on 1/5/2024
Said Certificate requires correction as permitted by Section 18-211 of the Limited
Liability Company Act of the State of Delaware.
3. The inaccuracy or defect of said Certificate is (must give specific reason):
When drafting the document, the name was meant to be
"US-STABLE-P2 15945 State Road 54 Odessa, LLC"
however it was mistakenly typed in as "US-STABLE-P2 15939 State Road 54 Odessa, LLC"
4. Article 1, Heading, and Execution of the Certificate is corrected to read as follows:
New heading with corrected name: US-STABLE-P2 15945 State Road 54 Odessa, LLC
Article 1: "The name of the limited liability company is US-STABLE-P2 15945 State Road 54 Odessa, LLC
Now "In witness whereof" stating: "the undersigned has executed this Certificate of Formation of
US-STABLE-P2 15945 State Road 54 Odessa, LLC this 5 day of January 2024."

By: 

Authorized Person

Name: Glean Lowenstein

Print or Type

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