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To:

Division of Corporations

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: (850)617-6383

From:

<u>್</u>ವರ್**Email Address:** 

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160000017 Phone : (855)498-5500

Fax Number : (890)432-3622

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

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

	LORIDA OR LORDINA DISTITUDI ETADISTE E COME ANT	<u> </u>
	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: 50THAVE, LLC	- 👸
SECO:	The Florida Document number of the limited liability company is:    L24000315796   Document to be corrected is:   Articles of Organization   Articles of Organization   Document to be corrected is:   Documen	
. 1	(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT	į
X	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the correcte tatement are as follows:	∌d
,	he name of the LLC is 150THAVE, LLC	-
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	DR.	
	Vas defectively signed. The manner in which the document was defectively signed and the appropriate correct sollows:	tion are
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	he electronic transmission of the record was defective.	
	Signature of Authorized Representative Date	
	of new registered agent, if applicable :( NOTE: if correcting the registered agent, the new registered agent muthe designation).	st sign
New Re I hereby provision obligati	stered Agent's Signature, if changing Registered Agent: ccept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the of all statutes relative to the proper and complete performance of my duties, and I am familiar with and acce s of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to hange in the registered office address fl hereby confirm that the limited liability company has been notified in	pt the merely

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