

N12 000003971

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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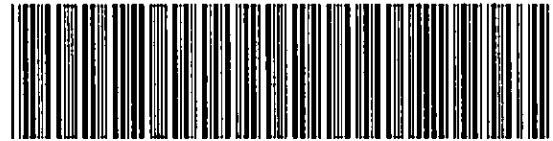
(Business Entity Name)

(Document Number)

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
300 ALABAMA STREET, N.W.  
ATLANTA, GA 30334

2020 MAY 18 PM 6:58

FILED

JUN 08 2020  
S. YOUNG

### COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CHRIST LIKENESS SERVICE CENTER INC.

Name of Corporation

**DOCUMENT NUMBER:** N12000003971

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

TSACHAI ARIS

Name of Contact Person

Firm Company

PO BOX 267392

Address

WESTON, FL 33226

City/State and Zip Code

skymaduro@gmail.com

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

For further information concerning this matter, please call:

TSACHAI ARIS

Name of Contact Person

at ( 954 ) 465-9176

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- \$35.00 Filing Fee
- \$43.75 Filing Fee & Certificate of Status
- \$43.75 Filing Fee & Certified Copy
- \$52.50 Filing Fee, Certificate of Status & Certified Copy

**Mailing Address:**

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

**Street Address:**

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

# ARTICLES OF CORRECTION

For

CHRIST LIKENESS SERVICE CENTER INC.

Name of Corporation as currently filed with the Florida Dept. of State

N12000003971

Document Number (if known)

Pursuant to the provisions of Section 617.0124, Florida Statutes, this corporation files these Articles of Correction within 30 days of the file date of the document being corrected.

These articles of correction correct FLORIDA NOT FOR PROFIT CORPORATION,  
(Document Type Being Corrected)

filed with the Department of State on 4/30/2020  
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

PRINCIPAL ADDRESS: 1252 WILLOW DR, WESTON, FL 33326

REGISTERED AGENT NAME: TSACHAI N MADURO

REGISTERED AGENT ADDRESS: 1252 WILLOW DR, WESTON, FL 33326

PRESIDENT NAME: TSACHAI N MADURO

Correct the inaccuracy, incorrect statement, or defect:

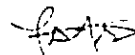
PRINCIPAL ADDRESS: 4081 NW 115TH TER, SUNRISE, FL 33323

REGISTERED AGENT NAME: TSACHAI ARIS

REGISTERED AGENT ADDRESS: 4081 NW 115TH TER, SUNRISE, FL 33323

PRESIDENT NAME: TSACHAI ARIS

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CORPORATION  
STATE OF FLORIDA



5/14/2020 | 5:24 AM PDT

(Signature of a director, president or other officer - if directors or officers have not been selected by an incorporator - if in the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

TSACHAI ARIS

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35.00