

11300011786

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of
Correction / NC

Sy 1-11-13

COVER LETTER

TO: Amendment Section
Division of Corporations

FROM INSTITUT INTERNATIONAL DE NATUROPATHIE, INC

TO

SUBJECT: EDUCATION REGIONALE DE NATUROPATHIE, INC
Name of Corporation

DOCUMENT NUMBER: N12000011786

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

Please return all correspondence concerning this matter to the following:

DR MAIGNAN JEAN-BAPTISTE
Name of Contact Person

Firm/Company

12620 NE 4TH AVENUE
Address

NORTH MIAMI BEACH FL 33161
City/State and Zip Code

ENOCH MILIEN@HOTMAIL.COM

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

For further information concerning this matter, please call:

MAIGNAN JEAN-BAPTISTE
~~ENOCH MILIEN@HOTMAIL.COM~~ at (786) 487-6836
Name of Contact Person 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF CORRECTION

For

INSTITUT INTERNATIONAL DE NATUROPATHIE, INC

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

N12000011786

Document Number (if known)

Pursuant to the provisions of Section 607.0124 or 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 NAME CHANGE

(Document Type Being Corrected)

filed with the Department of State on DEC 19, 2012

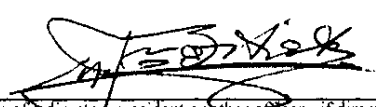
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

THE NEW NAME FOR THE NEW INCORPORATION IS
"EDUCATION REGIONALE DE NATUROPATHIE, INC"

Correct the inaccuracy, incorrect statement, or defect:

THE NAME OF THE INCORPORATOR IS MAIGNAN JEAN-BAPTISTE
IT WAS WRITTEN WRONG (MAIHAN)


(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.)

MAIGNAN JEAN-BAPTISTE
(Typed or printed name of person signing)

PRESIDENT
(Title of person signing)

Filing Fee: \$35.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA