

N24 000000 39154

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

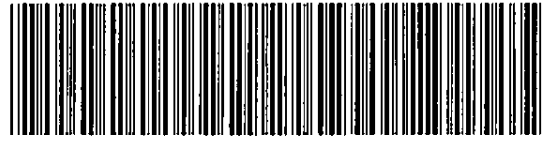
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2024 APR 15 PM 3:52  
CLERK OF SUPERIOR COURT  
STATE OF MICHIGAN

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Ki Events Community Fondation Inc  
Name of Corporation

**DOCUMENT NUMBER:** N2-4000003954

The enclosed Articles of Correction and fee are submitted for filing.  
Please return all correspondence concerning this matter to the following:

Niketa Jackson  
Name of Contact Person

Ki Events Community Fondation Inc  
Firm/Company

1710 Manatee Ave E  
Address

Bradenton, FL 34208  
City/State and Zip Code

kievents1710@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Niketa Jackson at ( 941 ) 7376136  
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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF CORRECTION**

For

Ki-Events Community Fondation Inc

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

N24000003954

\_\_\_\_\_  
Document Number (if known)

FILED  
2024 APR 15 PM 3:52  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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 EntityName  
(Document Type Being Corrected)

filed with the Department of State on 03/22/2024  
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

\_\_\_\_\_  
The entity name has a spelling error. KI-EVENTS COMMUNITY FONDATION INC  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Correct the inaccuracy, incorrect statement, or defect:

\_\_\_\_\_  
Correct entity name KI-EVENTS COMMUNITY FOUNDATION INC  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Niketa Jackson

(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.)

Niketa Jackson  
\_\_\_\_\_  
(Typed or printed name of person signing)

President  
\_\_\_\_\_  
(Title of person signing)

**Filing Fee: \$35.00**