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SECRETARY OF STATE
TALLAHASSEE. FLORIDA

C. Couttlette SEP 2 6 2007

APPROVED AND FILED

COVER LETTER

TO:	Amendment Section Division of Corporation
SUBJ	ECT: AHHH!YEAH!

SUBJECT: AHHH!YEAH! FILM PF	RODUCTIONS, INC.	
DOCUMENT NUMBER: P0700009	•	
The enclosed Articles of Correction and fe	·	
Please return all correspondence concernin	g this matter to the following:	
JOSEPH N MARTINI		
(Name of Contact Person) AHHH! YEAH! FILM PRODUCT (Firm/Company)	IONS, INC.	
2601 TREYMORE DR		
ORLANDO, FL 32825 (City/State and Zip Code)	·	
For further information concerning this ma	itter, please call:	
JOSEPH N MARTINI (Name of Contact Person)	at (404) 964-2728 (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amou	int:	
☐ \$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	Street Address: Amendment Section Division of Corporations Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF CORRECTION

for

Name of Corporation as currently tiled with the Florida Dept. of State		
P07000093867		
Document Number (if known)		
Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation these Articles of Correction within 30 days of the file date of the document being corrected	on file	s
These articles of correction correct FOR PROFIT CORPORATION (Document Type Being Corrected)	 ,	
filed with the Department of State on AUGUST 21, 2007 (File Date of Document)		
Specify the inaccuracy, incorrect statement, or defect: ARTICLE VII READS: JOSEPH N MALDONADO		
		_
	SECRE TALLA	O7 SEP
	TAR HASS	20
Correct the inaccuracy, incorrect statement, or defect:	Y OF S	AH E
ARTICLE VII READS: JOSEPH N MARTINI	ORICA	: - -
		<u> </u>
		
(Signature of a director, president or other officer - it directors or officers have not been selected, by an incorporator - if in the hands of the receiver, trustee, or other court appointed tiduciary, by that fiduciary.)		
JOSEPH N. MARTINI		

09- 1 1-0 7 (Title of person s

(Typed or printed name of person signing)

Filing Fee: \$35.00