

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DELGARDO & CHACON ENTERPRISES INC
Name of Corporation

DOCUMENT NUMBER: P14 000060432

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

Please return all correspondence concerning this matter to the following:

CHEILA CHACON
Name of Contact Person

DELGARDO + CHACON ENTERPRISES INC
Firm/Company

1401 NW 18TH DR APT 202
Address

POMPANO BEACH, FL 33069
City/State and Zip Code

don@luna.development.net
E-mail address. (to be used for future annual report notification)

For further information concerning this matter, please call:

DON COHEN at (561) 929-1912
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

14 JUL 28 AM 11:06

DELGADO + CHACON ENTERPRISES, INC
Name of Corporation as currently filed with the Florida Dept of State

P 14000060432
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 ARTICLES OF INCORPORATION + NAME
(Document Type Being Corrected)

filed with the Department of State on 7-7-14
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

DELGADO - IS Spelled WRONG

Correct the inaccuracy, incorrect statement, or defect:

DELGADO + CHACON ENTERPRISES INC

X Cheila Ch

(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.)

CHEILA CHACON

(Typed or printed name of person signing)

President

(Title of person signing)