## P21000064289

	<u>.</u> .	
(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ity/State/Zip/Phone	<u>#)</u>
(		,
PICK-UP	☐ WAIT	MAIL
(Bt	usiness Entity Name	e)
	ocument Number)	
(2)	ocament Hamber,	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
	_	
		1
	<u> </u>	

Office Use Only



600370602786

07/27/21--01021--007 \*\*35.00

1977 27 Fr. 3: 24

R. WHITE AUG 1 0 2021

## COVER LETTER

TO: Amendment Section **Division of Corporations** Grandilli Inc. SUBJECT: Name of Corporation DOCUMENT NUMBER: P21000064289 The enclosed Articles of Correction and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jo Ann Abrams Name of Contact Person Jo Ann Abrams, Attorney at Law Firm/Company 11440 Okcechobee Blvd., Suite 216 Address Royal Palm Beach, FL 33411 City/State and Zip Code j.a.abrams@att.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jo Ann Abrams Name of Contact Person 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

Grandilli Inc	
Name of Corporation as currently filed with the Florida D	ept. of State
P21000064289	
Document Number (if known)	
Pursuant to the provisions of Section 607.0124, Florida Statutes.	
These articles of correction correct Articles of Incorportion	
(Document Type	e Being Corrected)
filed with the Department of State on July 13, 2021 (File Date of Document)	<del>)</del> .
Specify the inaccuracy, incorrect statement, or defect: Business Address City and Zip Code	
Mailing Address City and Zip Code	
Correct the inaccuracy, incorrect statement, or defect:	
Business Address: 10796 Paso Fino Drive, Lake Worth, FL 33449	
Mailing Address: 10796 Paso Fino Drive, Lake Worth, FL 33449	
	٠ <u>.</u>
(Signature of a director, president or other officer - if directors of not been selected, by an incorporator - if in the hands of the recother court appointed fiduciary, by that fiduciary.)	or officers have ceiver, trustee, or
Savino Grandilli	President
(Typed or printed name of person signing)	(Title of person signing)