

P10000012109

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(Address)

(City/State/Zip/Phone #)

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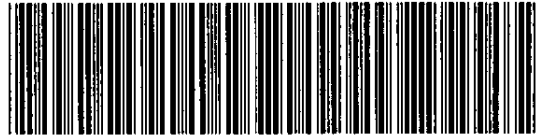
(Business Entity Name)

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FEB 22 2010

EXAMINER

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** LATINTROPI FOOD ENTERPRISES CORP.

Name of Corporation

**DOCUMENT NUMBER:** P10000012109

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

Please return all correspondence concerning this matter to the following:

JEANETTE BOBEA

Name of Contact Person

RAMON REYES, PA

Firm/Company

5035 PALM AVENUE

Address

HIALEAH, FL 33012

City/State and Zip Code

JEANETTE@PROSPERITYTRUSTUS.COM

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

For further information concerning this matter, please call:

JEANETTE BOBEA

Name of Contact Person

at ( 305 ) 822-3306

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

**LATINTROPI FOOD ENTERPRISES CORP.**

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

**P10000012109**

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**,  
(Document Type Being Corrected)

filed with the Department of State on **FEBRUARY 9, 2010**,  
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

**PRINCIPAL PLACE OF BUSINESS ADDRESS:**

**5327 PALM AVENUE, HIALEAH, FL 33012**

**MAILING ADDRESS OF CORPORATION:**


**5327 PALM AVENUE, HIALEAH, FL 33012**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
10 FEB 19 AM 11:33

Correct the inaccuracy, incorrect statement, or defect:

**CORRECT BUSINESS AND MAILING ADDRESS AS FOLLOWS:**

**2800 W. 84 STREET, HIALEAH GARDENS, FL 33018**

  
(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.)

**FRANKLIN R. MUNOZ**

(Typed or printed name of person signing)

**SECRETARY/TREASURER**

(Title of person signing)

**Filing Fee: \$35.00**