P15000061348

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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15 AUG 17 AM 6:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG 18 2015

R. WHITE

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Calabaza Transport, Corp.
Name of Corporation

DOCUMENT NUMBER: P15000067348

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

Please return all correspondence concerning this matter to the following:

Liliana Hadfeg
Name of Contact Person

Calabaza Transport, Corp.
Firm/Company

5891 W 9th Lane
Address

Hialeah, Florida 33012
City/State and Zip Code

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

For further information concerning this matter, please call:

Liliana Hadfeg at (786) 357-8111
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

15 AUG 17 AM 6:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Calabaza Transport, Corp.

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

P15000067348

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 Corporation,

(Document Type Being Corrected)

filed with the Department of State on 8/10/15.

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

I left the officer information section blank.

Correct the inaccuracy, incorrect statement, or defect:

I would like to include the officer name to be Jennifer D.Lopez

(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.)

Jennifer D. Lopez

—President—

(Typed or printed name of person signing)

- President -

(Title of person signing)

Filing Fee: $35.00