

LOS000095565

IncFile.com, LLC
14027 Memorial Dr., #110
Houston, TX 77079

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

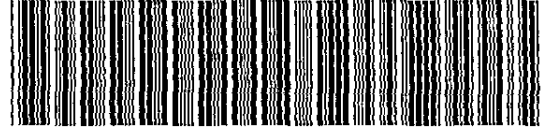
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100060663431

10/18/05--01036--006 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
05 OCT 18 PM 12:25

N. Culligan OCT 20 2005

**ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

FIRST: The name of the limited liability company is:
INSURANCE POLICY CENTRES, LLC

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:
ARTICLE II - THE STATE ABBREVIATION FOR THE PRINCIPAL OFFICE AND MAILING ADDRESS SHOULD BE IA


ARTICLE V - THE STATE ABBREVIATION FOR THE ADDRESS OF MEMBER ONE SHOULD BE IA

ARTICLE V - THE STATE ABBREVIATION FOR THE ADDRESS OF MEMBER TWO SHOULD BE IA

OR

☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction is as follows:

Dated: OCTOBER 10, 2005



Signature of a member or authorized representative of a member

NICOLAS SIHA

Typed or printed name of signee

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 OCT 18 PM 12:25