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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Children's House Academic Montescori Program Inc.
DOCUMENT NUMBER: NO9COCO 2-8
The enclosed Articles of Correction and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Julie Harper (Name of Contact Person)
The Children's House of Ormand Inc-
2010 State Road 40
Ormond Blach Fl. 32174 (City/State and Zip Code)
For further information concerning this matter, please call:
Julie Harper at (386) (612-1620 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35.00 Filing Fee \$\times \text{Status}\$
\$\Bigcup \\$43.75 \text{ Filing Fee & Certified Copy} \Bigcup \\$52.50 \text{ Filing Fee, Certificate of Status & Certified Copy}
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF CORRECTION

for

Children's House Academic Trogram Inc. Name of Corporation as currently filed with the Florida Dept. of State
NOGCOMMENT 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 <u>HY+rC/es</u> O+ Incorporation (Document Type Being Corrected)
These articles of correction correct Artrcles of Incorporations (Document Type Being Corrected) filed with the Department of State on Oncoment Type December 10 Document)
Specify the inaccuracy, incorrect statement, or defect: Part of the name was left out.
Children's House Academic Program Inc.
not correct
Correct the inaccuracy, incorrect statement, or defect:
Children's Plause Academic Montessori Program Inc.
C.H.A.M.P.
(Shgnature of a director, president or other bifficer - 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.)
Julie Hay per President (Typed or printed name of person signing) (Title of person signing)

Filing Fee: \$35.00