

N13000003402

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

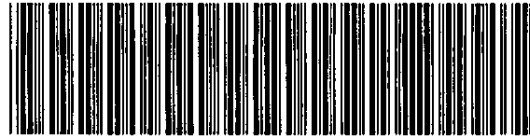
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

As of Court

4/19/13

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TAU DELTA PSI SORORITY, INCORPORATED
Name of Corporation

DOCUMENT NUMBER: N13000003402

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

Please return all correspondence concerning this matter to the following:

MICHELLE ARMSTRONG

Name of Contact Person

TAU DELTA PSI SORORITY, INCORPORATED

Firm/Company

4228 WINFORD CIRCLE

Address

ORLANDO, FL 32839

City/State and Zip Code

TDP.Atlas@gmail.com

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

For further information concerning this matter, please call:

MICHELLE ARMSTRONG at **(407) 952-7061**

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

TAU DELTA PSI SORORITY, INCORPORATED

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

N13000003402

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 **Officer/Director Detail**
(Document Type Being Corrected)

filed with the Department of State on **04/10/2013**
(File Date of Document)

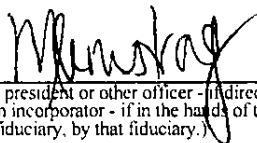
Specify the inaccuracy, incorrect statement, or defect:

President last name is showing as Collins-Thomas.

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TALLAHASSEE, FLORIDA

Correct the inaccuracy, incorrect statement, or defect:

President last name should be Collins-Timmons. Please correct my mistake.



(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.)

MICHELLE ARMSTRONG

(Typed or printed name of person signing)

Vice-President

(Title of person signing)

Filing Fee: \$35.00