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Ard Correction

## **COVER LETTER**

Division of Corporations		
SUBJECT:_SANTA ROSA		SINC
	Name of Corporation	
The enclosed Articles of Correction and for	ee are submitted f	or filing.
Please return all correspondence concerni	ng this matter to t	he following:
RAYMOND F SULLIVA	4N	_
SANTA ROSA BRIDG	ES INC	_
11763 OLD COURSE	RD	_
CANTONMENT, FL 32	2533	-
NAVYAIR123@GMAIL  E-mail address: (to be used for future annual to		-
For further information concerning this m		
KAREN BARBER PHE	) <sub>at (</sub> 850	983-5001
Name of Contact Person	``Area Cod	e & Daytime Telephone Number
Enclosed is a check for the following amo	ount:	
□ \$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	Street Address: Amendment Section Division of Corporations	

P.O. Box 6327

Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF CORRECTION

For

## SANTA ROSA BRIDGES INC

Name of Corporation as currently filed with the Florida Dept. of State
N14000006714
Document Number (if known)
Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation files have 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)
iled with the Department of State on JULY 16, 2014  (File Date of Document)
Specify the inaccuracy, incorrect statement, or defect:  ARTICLE V NAMES OF OFFICERS MISSPELLED
14 NE -5
<u>ි</u> ත
Correct the inaccuracy, incorrect statement, or defect:  MODIFY REFEREND JAMES HOLCOMBE TO REVEREND JAMES MARCOMBE
MODIFY MR. DON HAHN TO MR. DANIEL HAHN
Jase A. Bark
(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.)

KAREN R BARBER

(Typed or printed name of person signing)

**CEO** 

(Title of person signing)

Filing Fee: \$35.00