

N15 00000 2656

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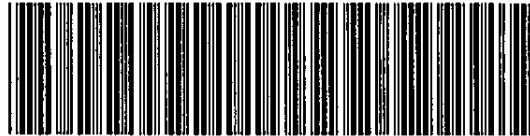
(Business Entity Name)

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SECRETARY OF STATE
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TALLAHASSEE, FLORIDA

MAR 26 2015

C. CARROTHERS

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CFAA Mustangs Inc

Name of Corporation

DOCUMENT NUMBER: N15000002656

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

Please return all correspondence concerning this matter to the following:

Alvin Lee

Name of Contact Person

Firm/Company

2529 Volta Circle

Address

Kissimmee, Florida 34746

City/State and Zip Code

coachalvinlee@gmail.com

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

For further information concerning this matter, please call:

Alvin Lee

Name of Contact Person

at (**786**) **251-3767**

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

CFAA Mustangs Inc

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

N15000002656

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 ARTICLE I , ARTICLE VII,
(Document Type Being Corrected)

filed with the Department of State on MARCH 15, 2015,
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

CFAA MUSTANGS, "INC"

TITLE: PDT ALVIN J LEE SR.

TITLE: DT ALVATINA LEE

TITLE: S DEBORAH BOWSER

TITLE: TD BELINDA DARBOUZE

Correct the inaccuracy, incorrect statement, or defect:

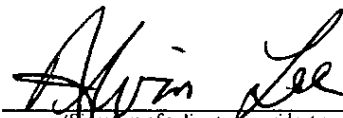
CFAA MUSTANGS, INC

TITLE: PDT ALVIN J LEE

TITLE: ST ALVATINA LEE

TITLE: M DEBORAH BOWSER

TITLE: TT BELINDA DARBOUZE



(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.)

Alvin Lee

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA