

(R	equestor's Name)			
(A	ddress)			
(A	ddress)			
(C	ity/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(B	usiness Entity Nam	e)		
(Document Number)				
Certified Copies	Certificates of Status			
Special Instructions to	o Filing Officer:			

Office Use Only



500307190045

01/02/18--01031--005 **35.00

JAN 03 2018

18 JAN -2 PH 4:10

COVER LETTER

TO: Amendment Section Division of Corporations	
The enclosed Articles of Correction and fe	e are submitted for filing.
Please return all correspondence concerning	ig this matter to the following:
Gloria Salazar Name of Contact Person	
Plumbing Contractor	ors Ass.
7204 SW UD Stree-	<u> </u>
Miomi, FL 33155 City/State and Zip Code	
GOIÜZ QVO DOMIO E-mail address: (to be used for future annual re	port notification)
For further information concerning this ma	atter, please call:
Oloria Salazar Name of Contact Person	at (305) (662-967) Area Code & Daytime Telephone Number
Enclosed is a check for the following amou	unt:
\$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

Plumbing Contractos Association Appienticesh Name of Corporation as currently filed with the Florida Dept. of State	nof	<u>Yog</u>	ram In	2.
N17000012128 Document Number (if known)				
Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corp these Articles of Correction within 30 days of the file date of the document being corre	oration	ı files		
These articles of correction correct Articles of Incorporation (Document Type Being Corrected)				
filed with the Department of State on <u>Occember 7, 2017</u> . (File Date of Document)				
Specify the inaccuracy, incorrect statement, or defect:				
corporate name should be	_			
Plumbing Contracto > Association				
Apprenticeship Program Inc.				
		** /-	_	
The C in contractors was missing			_	
	<u> </u>	- 6		
Correct the inaccuracy, incorrect statement, or defect:	選びが	JAN -2		
Should be		- 3 -		
Plumbing Contractors Association				
Apprenticeship Program Inc.			_ _	
			_	
(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.)				
Paset C. BEAVS (Typed or printed name of person signing) (Title of person)	M	<u>, </u>	_	

Filing Fee: \$35.00