N1900000 6166

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: The Emancipation Day Festival of Northwest

Name of Corporation

DOCUMENT NUMBER: N1900006166

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

Please return all correspondence concerning this matter to the following:

Byron L. Dickens

Name of Contact Person

The Emancipation Day Festival

Firm/Company

4476 Dickson Road

Addres

Greenwood, FL 32443

City/State and Zip Code

byron.dickens1@gmail.com

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

For further information concerning this matter, please call:

Byron L. Dickens

_.850

693-2290

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

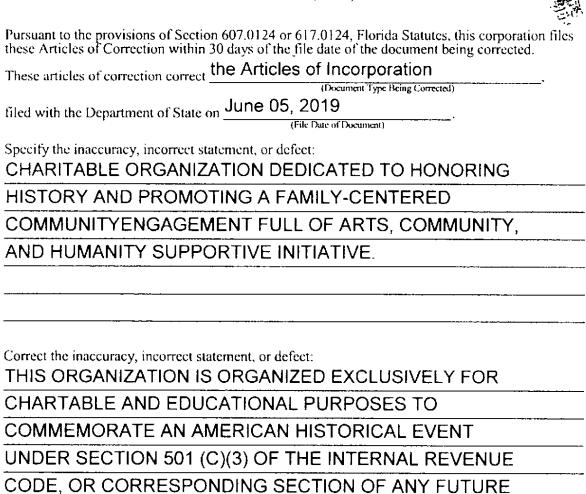
For

The Emancipation Day Festival of Northwest FL, Inc.

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

N1900006166

Document Number (if known)



(Suparture 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.)

Byron L. Dickens

FEDERAL TAX CODE.

President

(Typed or printed name of person signing)

(Title of person signing)

Filing Fee: \$35.00