## N20000011755

Office Use Only



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## COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Save Nature Florida, Inc.	Name of Corporation
DOCUMENT NUMBER: N2000001173	·
The enclosed Articles of Correction and	
Please return all correspondence conce	·
Amanda Sheffield	
Name of Contact Person	
Save Natural Florida, Inc.	
Firm/Company	
500 NW 15th St	
Address	<del></del>
Okeechobee, FL 34972	
City/State and Zip Cod	le de la company
amandaapril87@gmail.com  E-mail address: (to be used for future ann	und saport notification)
For further information concerning this	matter, please call:
Amanda Sheffield  Name of Contact Person	at () 532-8728 Daytime Telephone Number
Enclosed is a check for the following a	mount:
■ \$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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF CORRECTION

For

Save Nature Florida, Inc.	
Name of Corporation as currently filed with the Floric	da Dept. of State
N20000011255	
N20000011755	
Document Number (if known)	
Pursuant to the provisions of Section 617.0124, Florida Statute Articles of Correction within 30 days of the file date of the doc	es, this corporation files these cument being corrected.
These articles of correction correct Articles of Incorporation	
(txeunem	Type Being Corrected)
filed with the Department of State on 9/28/2020	
(File Date of Docum	ment)
Specify the inaccuracy, incorrect statement, or defect:	
The name was incorrect. We are changing the name to the correct name.	
The man moore of the changing the name to the correct pane.	· 
	. •
	T. 12:
Correct the imaginary incorrect statement, or defeat	
Correct the inaccuracy, incorrect statement, or defect:	
The name of the corporation is: Save Natural Florida, Inc.	
(Signature of a director, president or other office). Nafire not been selected, by an incorporator - if in the hands of to other court appointed fiduciary, by that fiduciary.)	ctors or officers have the receiver, trustee, or
Amanda Sheffield	Secretary/Treasurer
(Typed or printed name of person signing)	(Title of person signing)

Filing Fee: \$35.00