

NZ1000005032

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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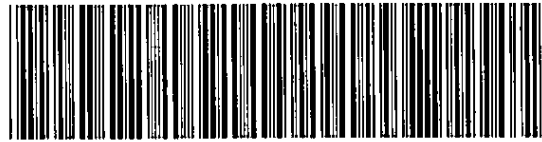
(Business Entity Name)

(Document Number)

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R. WHITE
JUL 12 2021

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ABA Love, Inc.
Name of Corporation

DOCUMENT NUMBER: ND1 00000 5032

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

Please return all correspondence concerning this matter to the following:

Karolyn Sheekey
Name of Contact Person

Chimento Law
Firm/Company

145 City Place, Suite 301
Address

Palm Coast FL 32164
City/State and Zip Code

Karolyn@legalteamforlife.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Karolyn Sheekey at (386) 445-8900, ext 127
Name of Contact Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | |
|--|---|
| <input type="checkbox"/> \$35.00 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status |
| <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$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

ABA Love, INC

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

N2100000 5032

Document Number (if known)

Pursuant to the provisions of Section 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 N2100000 5032

(Document Type Being Corrected)

filed with the Department of State on 4-27-21

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

The Name is to be ABA Love, Inc.
Not ABALove INC

Correct the inaccuracy, incorrect statement, or defect:

Please correct to ABA Love, INC

Isabel Principe

(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.)

Isabel Principe

(Typed or printed name of person signing)

CEO

(Title of person signing)

Filing Fee: \$35.00