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SECRETARY OF STAT

COVER LETTER

TO: Amendment Section Division of Corporations

NEIGHBORS NETWORK OF LEE C	COUNTY, INC.
Nan	ne of Corporation
DOCUMENT NUMBER: N22000005182	
The enclosed Articles of Correction and fee	are submitted for filing.
Please return all correspondence concerning	this matter to the following:
BARBARA SHEARER	
Name of Contact Person	
NEIGHBORS NETWORK OF LEE COUNTY, INC	
Firm/Company	
7403 SIKA DEAR WAY	
Address	
FORT MYERS, FL 33966	
City/State and Zip Code	
NEIGHBORSNETWORKLEECOUNTY@GMAIL.	СОМ
E-mail address: (to be used for future annual repo	rt notification)
For further information concerning this matt	er, please call:
BARBARA SHEARER	850 459-4220
Name of Contact Person	at (
Enclosed is a check for the following amount	ıt:
□ \$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

FILED

ARTICLES OF CORRECTION

Гог

FAT 2 / 38 34 3

NEIGHBORS NETWORK OF LEE COUNTY, INC.

SECRETARY OF STATE TALLAHASSEE.FL

Name of Corporation as currently filed with the Florida Dept of State
N22000005182
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 ARTICLES OF INCORPORATION.
trocument type being Confeded)
filed with the Department of State on MAY 5, 2022 (File Date of Document)
Specify the inaccuracy, incorrect statement, or defect:
ARTICLE VII INITIAL OFFICERS
TITLE: S
JAMES L BROOKS
7382 KEY DEER CT.
FORT MYERS, FL
33966
Correct the inaccuracy, incorrect statement, or defect:
ARTICLE VII INITIAL OFFICERS
TITLE: S
COZETTA KAY JASSO
3372 WOODS EDGE CIR #103
BONITA SPRINGS, FI 34134
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.)
Pina Anna CHChoco Dining

BARBARA SHEAKEK
(Typed or printed name of person signing)

Yrlsident.
(Title of person signing)

Filing Fee: \$35.00