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## COVER LETTER

**TO:** Amendment Section Division of Corporations

SUBJECT: PANHANDLE ALTERNATIVE I	JEESTYLE SOCIE  Name of Corporation	TY CORPORATION
DOCUMENT NUMBER: N23000005248		
The enclosed Articles of Correction and f		for filing.
Please return all correspondence concerni	ing this matter to	the following:
JESSICA POSEY CPA		
Name of Contact Person		<del></del> ·
JESSICA POSEY CPA PA		
Form Company		<del>_</del>
2950 HARVEST RD		
Address		_
JAY, FL 32565		
City/State and Zip Code		
E mail address: (to be used for future annual i		
CLIFFORD COX  Name of Contact Person	850	382-1787
Name of Contact Person	Area Code	Daytime Telephone Number
Enclosed is a check for the following amo	ount:	
■ \$35.00 Filing Fee	S43.75 Filing Fee & Certificate of Status	
3 \$43.75 Filing Fee & Certified Copy	☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy	
Mailing Address: Amendment Section		Street Address: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF CORRECTION

For

PANHANDLE ALTERNATIVE LIFESTYLE SOCIETY CORPORATION	м — 1813 дом - 2 РН 1: 2:
Name of Corporation as currently filed with the Plouda Dept.	of State
N23000005248	
Document Number (if known)	
Pursuant to the provisions of Section 617.0124, Florida Statutes, the Articles of Correction within 30 days of the file date of the docume	is corporation files these not being corrected.
These articles of correction correct ARTICLES OF INCORPORATION	
TIACHICH TYPE IS	eing Corrected)
filed with the Department of State on APRIL 28, 2023  (File Date of Document)	
Specify the inaccuracy, incorrect statement, or defect:	
One word in name is incorrect - Lifestyle	
President's name is incorrect	
	···
-,	
Correct the inaccuracy, incorrect statement, or defect:	
Name - Panhaudic Alternative Life Styles Society Corporation	
President's name - Clifford Cox	
allton los	
(Signature of a directit, president or other officer - I directors or a not been selected, by an incorporator - if in the hands of the receiv	officers have
other court appointed fiduciary, by that fiduciary )	
Clifford Cex	President / Registered Agent
(Typod or printed name of person signing)	(Title of person signing)

Filing Fee: \$35.00