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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6380

From:

Account Name : CAPITOL SERVICES, INC.
Account Number : I20160000017
Phone : (855)498-5500
Fax Number : (800)432-3622

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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TALLAHASSEE, FL

**COR AMND/RESTATE/CORRECT OR O/D RESIGN
EW ASSOCIATION, INC.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$43.75

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: EW ASSOCIATION INC

Name of Corporation

DOCUMENT NUMBER: N23000005331

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

Please return all correspondence concerning this matter to the following:

JOSHUA ROBINS

Name of Contact Person

SRC PROPERTIES, LLC

Firm/Company

230 5TH STREET

Address

MIAMI BEACH, FL 33139

City/State and Zip Code

joshua@robinscompanies.com

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

For further information concerning this matter, please call:

JOSHUA ROBINS

Name of Contact Person

at

305

Area Code

674-0600

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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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TALLAHASSEE, FL

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ARTICLES OF CORRECTION

For

EW ASSOCIATION, INC.

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

N23000005331

Document Number (if known)

Pursuant to the provisions of Section 607.0124, Florida Statutes.

These articles of correction correct ARTICLES OF INCORPORATION

(Document Type Being Corrected)

filed with the Department of State on 04/28/2023

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

EW ASSOCIATION, INC.

Correct the inaccuracy, incorrect statement, or defect:

EW ASSOCIATION INC



(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.)

JOSHUA ROBINS

(Typed or printed name of person signing)

S/D

(Title of person signing)

Filing Fee: \$35.00

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SECRETARY OF STATE
TALLAHASSEE FL

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