

N 2300000 8616

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

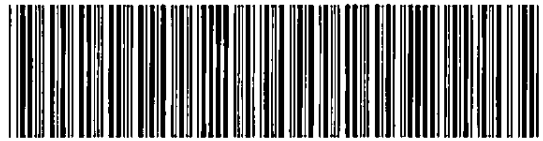
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2024 APR 10 PM 12:37
CLERK OF STATE
TALLAHASSEE, FL

FL HUNT
04/10/24

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Genesis Recovery, Inc.

Name of Corporation

DOCUMENT NUMBER: N23000008616

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

Please return all correspondence concerning this matter to the following:

Karen Moffett

Name of Contact Person

Genesis Recovery, Inc.

Firm/Company

573 Dowling Circle

Address

Lady Lake, FL 32159

City/State and Zip Code

karen.moffett22@yahoo.com

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

For further information concerning this matter, please call:

Karen Moffett

at (407)

334-2550

Name of Contact Person

Area Code

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

2011-07-19 PM 12:37
STATE
TALLAHASSEE, FL

ARTICLES OF CORRECTION

For

Genesis Recovery, Inc.

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

N23000008616

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 Address Correction
(Document Type Being Corrected)

filed with the Department of State on April 4, 2024
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

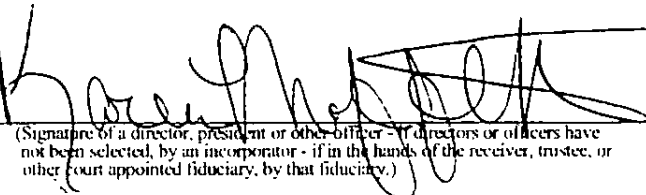
Street number was entered incorrectly for principal address:

Currently it is 1432 West Line Street, Leesburg, FL 34748

Correct the inaccuracy, incorrect statement, or defect:

It should be 1423 West Line Street, Leesburg, FL 34748

FILED
APR 10 2024 PM 12:37
TALLAHASSEE, FL


(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.)

Karen Moffett

(Typed or printed name of person signing)

Registered Agent

(Title of person signing)

Filing Fee: \$35.00