

PD3000049208

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

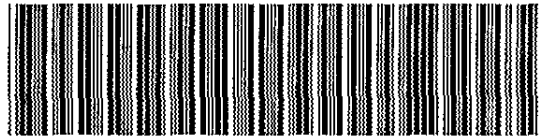
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/09/03--01086--001 **35.00

RECEIVED
03 MAY -9 PM 12:26
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
2003 MAY -9 PM 2:26
TALLAHASSEE, FLORIDA

C. Coulliette MAY 09 2003

ATTORNEYS' TITLE

Requestor's Name

1965 Capital Circle NE, Suite A

Address

Tallahassee, Fl 32308

City/St/Zip

850-222-2785

Phone #

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1- DWEE & ASSOCIATES, INC.

2-

3-

4-

☒ Walk-in

☐ Pick-up time ASAP

☐ Certified Copy

☐ Mail-out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

<input type="checkbox"/>	Profit
<input type="checkbox"/>	Non-Profit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input checked="" type="checkbox"/>	Other

AMENDMENTS

<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS

<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION

<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

ARTICLES OF CORRECTION

for

Dwee & Associates, Inc.

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

P03000049208

Document Number (if known)

FILED
2003 MAY -9 PM 2:26
TALLAHASSEE, FLORIDA

Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation files these Articles of Correction.

These articles of correction correct Articles of Organization
(Document Type)

filed with the Department of State on May 2, 2003
(File Date of Document)

Specify the incorrect statement and reason it is incorrect or the manner in which the execution was defective:

INCORRECT STATEMENT: Officer/Director Name and Address was incorrect because
there is only one officer/director. Janet Blanco is to be removed as VP & D;
Jeffrey Hall is to be removed as S, T & D.

Correct the incorrect statement or defective execution:

CORRECT STATEMENT: Officer/Director Name and Address

Robert B. Durbin, P, VP, S, T & D

2290 Pinnacle Circle N.

Palm Harbor, FL 34684



Signature of the Chairman or Vice Chairman of the Board of Directors, any officer, or an incorporator, if applicable.

Robert B. Durbin

Typed or printed name of signee

President

Title

Filing Fee: \$35.00