

PO3000082586

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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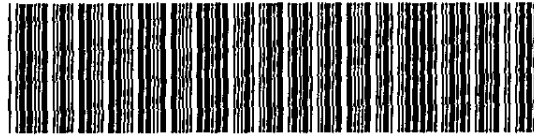
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TAXATION SECTION

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Property Exchange Services, Inc.

(Name of Corporation)

**DOCUMENT NUMBER:** P0300082586

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

Please return all correspondence concerning this matter to the following:

Andrew W. Gustafson

(Name of Contact Person)

Property Exchange Services, Inc.

(Firm/Company)

151 Regions Way, Suite 3-D

(Address)

Destin, Florida 32541

(City/State and Zip Code)

For further information concerning this matter, please call:

Andrew W. Gustafson

(Name of Contact Person)

at ( 850 ) 837-3043

(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  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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05 OCT 7 11 AM 8:58  
TALLAHASSEE, FL 32301

**ARTICLES OF CORRECTION**

for

**Property Exchange Services, Inc.**

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

**P0300082586**

Document Number (if known)

Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation files these Articles of Correction within 30 days of the file date of the document being corrected.

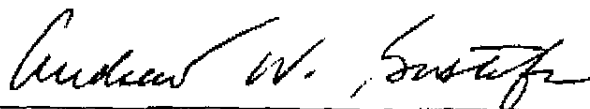
These articles of correction correct **Articles of Organization**  
(Document Type Being Corrected)

filed with the Department of State on **July 29, 2003**  
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

**Article II - Principal address change****Article II - Mailing address change****Article VI - Name and address of incorporator****Article VII - Name and address of Officer**

Correct the inaccuracy, incorrect statement, or defect:

**Article II - 151 Regions Way, Suite 3-D, Destin, FL 32541****Article VI - Andrew W. Gustafson****151 Regions Way, Suite 3-D, Destin, FL 32541****Article VII - Andrew W. Gustafson****151 Regions Way, Suite 3-D, Destin, FL 32541**

(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.)

**Andrew W. Gustafson**

(Typed or printed name of person signing)

**President**

(Title of person signing)

**Filing Fee: \$35.00**

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