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## TRANSMITTAL LETTER

	nendment Section vision of Corporations	
SUBJECT	C: MELINDA	ENTERPRISES, INC.
DOCUME	ENT NUMBER: PO4000	Jospanni, on J
The enclos	sed Articles of Correction and fee are	submitted for filing.
	rn all correspondence concerning this	
		JNG GORY TPERSON)
	MICHAEL J. McG 639 East Ocean Av	
	Boynton Beach, thi (561) 734-8599 • F	orida 93435
	(Add	ress)
-	(City/State a	nd Zip Code)
For further	information concerning this matter, p	lease call:
	MICHAEL J. Mc Grovy at (Name of Person) at (	561 )734-8599
	(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is	a check for the following amount:	
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<b>\_</b> \$	643.75 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, Florida 32314	Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

FILED

## ARTICLES OF CORRECTION

04 FEB -6 AM 11: 22

for

SECRETARY OF STATE

MELINDA ENTERPHISES, TALL AHASSEE, FI
Name of Corporation as currently filed with the Florida Dept. of State
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 ARTICLE 1 - NAME (Document Type)
filed with the Department of State on 127 2004 (File Date of Document)
Specify the inaccuracy, incorrect statement, or defect:
Name Incorrect
<del></del>
Correct the inaccuracy, incorrect statement, or defect:
CORRECT NAME IS
SUPERIOR FLATWORK INC.
Melach Michelan
(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.)
Melinda Mickelson  (Typed or printed name of person signing)  (Title of person signing)

Filing Fee: \$35.00