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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: RUBY FRIDAD INC  (Name of Corporation)  DOCUMENT NUMBER: P0400090798
The enclosed Articles of Correction and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
DAVIDA (OVEN ESQ. (Name of Person)
DAVIDA. COVEN PA
V856 EHST VAKLAND PARK BOULE VARD
FURT LAUDERDALE FL 33300
For further information concerning this matter, please call:
MI (HELLE MARIENE Zat (954) 5 65 9 4 10 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$35.00 Filing Fee  \$\Bigcup \$43.75 Filing Fee & Certificate of Status
☐ \$43.75 Filing Fee & Certified Copy ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, Florida 32314Tallahassee, Florida 32399

## ARTICLES OF CORRECTION

ORRECTION

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TALLAHASSE STATE

With the Florida Dept. of State

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

P0400090798

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 Correction correction correction   Articles of Correction correction   Articles of Correction correction   Articles of Correction correction   Articles of Correction   Articles of C
Specify the inaccuracy, incorrect statement, or defect:  THE ADDRESS IS INCORRECT:  37 (04 "NORTHWEST" 10 TH AVENUE
Correct the inaccuracy, incorrect statement, or defect:  THE (ORRECT ADDRESS SHOULD  BE: 3764 "NORTHEAST" IV" AVENUE
(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.)
(Typed or printed name of person signing)  (Typed or printed name of person signing)

Filing Fee: \$35.00