

P05000028664

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

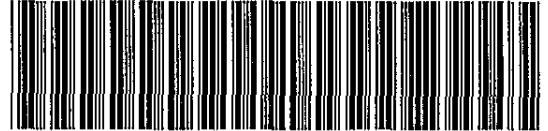
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Articles To
Correction

03/18/05--01040--015 **35.00

RECEIVED

05 MAR 18 PM 11:54

FILE
CORRECTIONS
TALLAHASSEE, FLORIDA

FILED

05 MAR 18 PM 3:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AJR
3/18

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- DEHUMIDIFICATION SOLUTIONS, 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 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 checked="" type="checkbox"/>	ARTICLES OF CORRECTION

Examiner's Initials

ARTICLES OF CORRECTION

for

Dehumidification Solutions, Inc.

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

P05000028664

Document Number (if known)

FILED
05 MAR 18 PM 3:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 Incorporation
(Document Type)

filed with the Department of State on _____ February 23, 2005
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

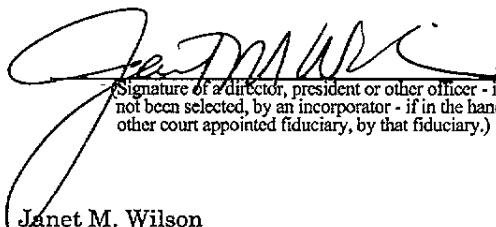
Myers, Jennifer J. is listed as President

Wilson, Janet M. is listed as Secretary

Correct the inaccuracy, incorrect statement, or defect:

Wilson, Janet M. is President

Myers, Jennifer J. is Secretary



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.)

Janet M. Wilson

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35.00