

P050000 70594

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AC

MAY 19 2005

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BIA AUTOFIX INC

(Name of Corporation)

DOCUMENT NUMBER: P05000070594

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

Please return all correspondence concerning this matter to the following:

ALEX SORSHER

(Name of Person)

LIBERTY TAX SERVICE

(Name of Firm/Company)

2500-1 N STATE ROAD 7

(Address)

HOLLYWOOD, FL 33021

(City/State and Zip Code)

For further information concerning this matter, please call:

ALEX SORSHER

(Name of Person)

at (954) 962-0011

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$35.00 Filing Fee

☐ \$43.75 Filing Fee & Certified Copy

☐ \$43.75 Filing Fee & Certificate of Status

☐ \$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

ARTICLES OF CORRECTION

for

BIA AUTOFIX INC

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

P05000070594

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 ORIGINAL PROFIT FLORIDA CORP. FILING

(Document Type)

filed with the Department of State on 05/13/2005

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

NAME OF CORPORATIONS SHOUL BE AUTOFIX PLUS, INC. NOT BIA AUTOFIX INC.

Correct the inaccuracy, incorrect statement, or defect:

NAME OF CORPORATIONS SHOUL BE AUTOFIX PLUS, INC.

(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.)

IGOR TALSKY

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35.00

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TALLAHASSEE, FLORIDA