

P05000072575

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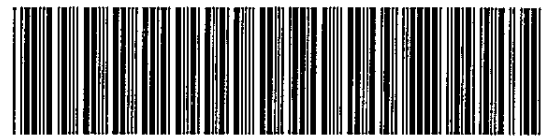
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

6-8  
Art of

**TRANSMITTAL LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** John Michael Wedding and Events Inc  
(Name of Corporation)

**DOCUMENT NUMBER:** PO5000072575

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

Please return all correspondence concerning this matter to the following:

Carma Williams  
(Name of Person)

\_\_\_\_\_  
(Name of Firm/Company)

5162 Lido St  
(Address)

Orlando FL 32807  
(City/State and Zip Code)

For further information concerning this matter, please call:

Stephen Roberts at ( 407 ) 923-4000  
(Name of Person) (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

John Michael Wedding and Events, Inc.  
Name of Corporation as currently filed with the Florida Dept. of State

POS 0000 72 575  
Document Number (if known)

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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 05/17/2005  
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

the name of the corporation  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Correct the inaccuracy, incorrect statement, or defect:

John Michael Weddings and Special Events, Inc.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Carma Williams

(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.)

Carma B Williams  
(Typed or printed name of person signing)

PRES.  
(Title of person signing)

Filing Fee: \$35.00