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Articles of Correction

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TRANSMITTAL LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: A-Z CONVERTIBLE TOPS PLUS, INC	ORPORATED poration)
DOCUMENT NUMBER: P05000090029	
The enclosed Articles of Correction and fee are sul	bmitted for filing.
Please return all correspondence concerning this m	natter to the following:
SHARON DIAZ (Name of Po	erson)
BOOKKEEPING & MORE, INC (Name of Firm)	Company)
3288 HILLMONT CIRCLE (Addres	·s)
ORLANDO, FL 32817 (City/State and	Żip Code)
For further information concerning this matter, ple	ase call:
SHARON DIAZ, EA at ((Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
□ \$35.00 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status
☑ \$43.75 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

ARTICLES OF CORRECTION

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A 77 COMMEDITALE MODE DI LIC TROOPPORATER	CEO.	'U A	4//: /3	
A-Z CONVERTIBLE TOPS PLUS, INCORPORATED Name of Corporation as currently filed with the Florida Dept. of State	ATTAGE	ARY DE	~~~	•
A-Z CONVERTIBLE TOPS PLUS, INCORPORATED Name of Corporation as currently filed with the Florida Dept. of State	nnA;	SSEE, F	PATE	
P05000090029			-UNIUA	
Document Number (if known)			* ,* .	¥2: *
Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statuthese Articles of Correction within 30 days of the file date of the document	ites, this ont being c	corporate corrected	ion files 1.	
These Articles of Correction correct ARTICLES OF INCORPORATION				
(Document Type)				
filed with the Department of State on 06/23/2005				
(File Date of Document)	•			
Specify the inaccuracy, incorrect statement, or defect:			•	
PRINCIPAL ADDRESS: 38727 VULCAN CIRCLE ZEPHYRHILLS FL 33	3542			_ F = 47 ° °≅
MAILING ADDRESS: 38727 VULCAN CIRCLE ZEPHYRHILLS FL 3354	19			
MAILING ADDICESS. 38727 VCDCAN CIRCLE AND ITRITIDES I'D 350.	12	<u></u>		
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Correct the inaccuracy, incorrect statement, or defect:				
PRINCIPAL ADDRESS: 2400 AQUATIC DR ORLANDO, FL 32804				5_2*
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MAILING ADRESS; PO BOX 607705 QRLANDO, FL 32860	;	<u> </u>		
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(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.)

MONA B YOUNG

(Typed or printed name of person signing)

- PRESIDENT

(Title of person signing)