

P05000090651

(Requestor's Name)

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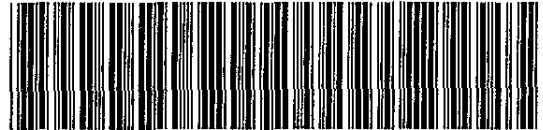
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2005 JUL 26 2005

## TRANSMITTAL LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** A WAY TO LIVE IT, INC.

(Name of Corporation)

**DOCUMENT NUMBER:** P05000090651

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

Please return all correspondence concerning this matter to the following:

JOHN H. WILBUR, ESQUIRE

(Name of Person)

JOHN H. WILBUR, P.A.

(Name of Firm/Company)

6621 SOUTHPOINT DRIVE N., SUITE #325

(Address)

JACKSONVILLE, FLORIDA 32216

(City/State and Zip Code)

For further information concerning this matter, please call:

JOHN H. WILBUR, ESQUIRE

(Name of Person)

at ( 904 ) 296-0750

(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

for

A WAY TO LIVE IT, INC.

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

P05000090651

Document Number (if known)

Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation has  
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 JUNE 24, 2005

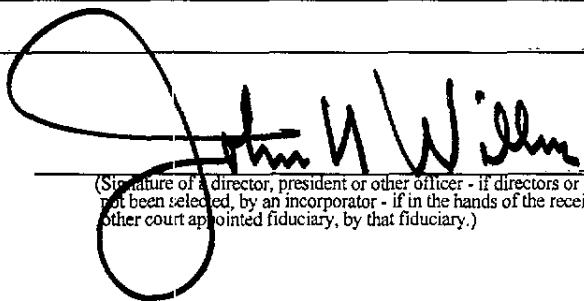
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

A WAY TO LIVE IT, INC.

Correct the inaccuracy, incorrect statement, or defect:

A WAY TO LIVE IT!, 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.)

JOHN H. WILBUR

(Typed or printed name of person signing)

ATTORNEY

(Title of person signing)

Filing Fee: \$35.00

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