

P05000090651

(Requestor's Name)

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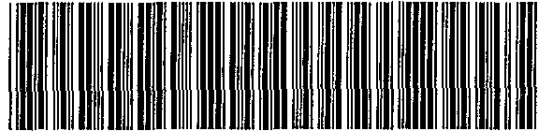
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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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 at (904) 296-0750
(Name of Person) (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)

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Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation has filed 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

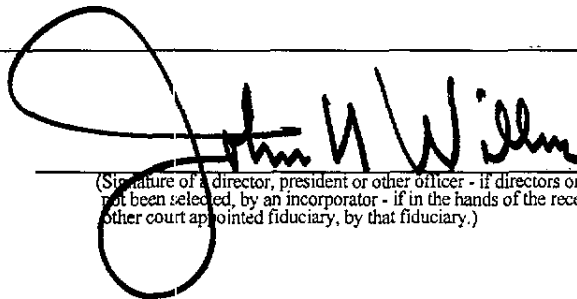
(File Date of Document)

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