

P05000101764

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

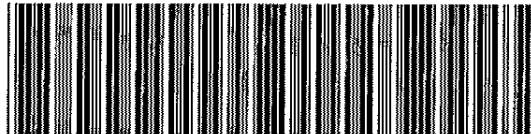
(Business Entity Name)

(Document Number)

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Articles of
Corporation

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05 AUG -8 PM 1:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DR
8/8/05

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Coastal Cages Inc

DOCUMENT NUMBER: p05000101764

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Shannon L Smith
(Name of Contact Person)

Coastal Cages, Inc.
(Firm/ Company)

735-B Commerce Ctr
(Address)

Sebastian Florida, 32958
(City/ State/ and Zip Code)

For further information concerning this matter, please call:

Lynn Smith at (772) 581-5595
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- \$35 Filing Fee
- \$43.75 Filing Fee & Certificate of Status
- \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)
- \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)

Mailing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

RECEIVED
05 AUG -4 AM 8:00
DIVISION OF CORPORATIONS

ARTICLES OF CORRECTION

for

Coastal Cages Inc

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

P05000101764

Document Number (if known)

FILED
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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 Corp.
(Document Type)

filed with the Department of State on 7/20/2005
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

No one listed

Correct the inaccuracy, incorrect statement, or defect:

Shannon L Smith, President, Vice President, Secretary, Treasurer, Officer

X Shannon Smith

(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.)

X Shannon Smith
(Typed or printed name of person signing)

X Shannon Smith President
(Title of person signing)

Filing Fee: \$35.00