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(Requestor's Name)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAI	L	
(Business Entity Name)	•	
(Document Number)		
Certified Copies Certificates of Status	. na . n	
Solution Solution		
Special Instructions to Filing Officer:		





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SECRETARY OF STATE DIVISION OF CORPORATIONS

09 JUN 25 AM 11: 50

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: BRETT E. FRIEDE	NBURG INSC/ance Inc.
DOCUMENT NUMBER: POSODO	•
The enclosed Articles of Correction and for	ee are submitted for filing.
Please return all correspondence concernis	ng this matter to the following:
Brett e. Friedensurg	
Name of Contact Person BRETT E. FRIEDENCUS TV Firm/Company	isulance Inc,
7871 Ambleside Wa	inf
Lake Wulth II	3)467
BFLJEDENBULG & AC	eport notification)
For further information concerning this ma	atter, please call:
BRETT E. FRIEDENDUNG Name of Contact Person	at (954) 2 42 5058 Area Code & Daytime Telephone Number
Enclosed is a check for the following amo	unt:
\$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, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF CORRECTION DIVISION OF CORPORATIONS

	for		09 JUN 25 AM 11:50
BRETT E. FRIEDENBURG	Insc	lance	IUC.
Name of Corporation a	as currently filed wit	h the Florida Dept. of State	
405000	O 190) ocument Number (if	- known)	
Pursuant to the provisions of Section 607. these Articles of Correction within 30 day	0124 or 617.0 s of the file d	0124, Florida Statu ate of the docume	ites, this corporation files nt being corrected.
These articles of correction correct	VTILLES	Occument Type Being Cor	nd Meny, rected)
filed with the Department of State on	(File Dat	e of Document)	.
Specify the inaccuracy, incorrect statement	nt, or defect:	1	0 •
Negleted to Cl	NEWR	business	: PUSE
Correct the inaccuracy, incorrect statemen	nt, or defect:	lawful	husiness
	,	,	
Null (Signature of a director, per	lesident ar other afflic	eer - if directors or officers	25
	ncorporator - if in the	hands of the receiver, trust	
Breit E. Friedenburg			Wes
(Typed or printed name of person signing)			(Title of person signing)

Filing Fee: \$35.00