

PG 5000 164903

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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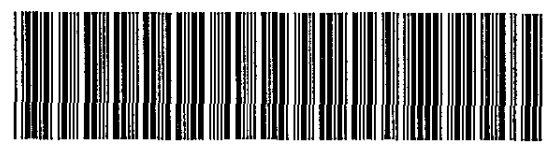
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Art. of Correct
CRG
1/19/06

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: 786 SUBS, INC.

(Name of Corporation)

DOCUMENT NUMBER: P05000164903

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

Please return all correspondence concerning this matter to the following:

KAMAL M SHAHID

(Name of Contact Person)

(Firm/Company)

10906 NW 41ST DRIVE

(Address)

CORAL SPRINGS, FL 33065

(City/State and Zip Code)

For further information concerning this matter, please call:

KAMAL M SHAHID

(Name of Contact Person)

at (**954**) **304-3373**

(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, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF CORRECTION

for

786 SUBS, INC.

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

P05000164903

Document Number (if known)

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 P05000164903

(Document Type Being Corrected)

filed with the Department of State on 12/19/2005

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

INCORRECT ADDRESS:

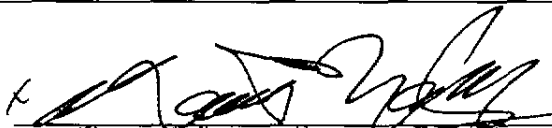
ADDRESS IS LISTED AS "NE 41ST DRIVE"

Correct the inaccuracy, incorrect statement, or defect:

NEW ADDRESS:

NW 41ST DRIVE

CORAL SPRINGS, FL 33065



(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 Kamal M. Samid

(Typed or printed name of person signing)

X President

(Title of person signing)

Filing Fee: \$35.00

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06 JAN 17 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA