

PC6 000000 3929

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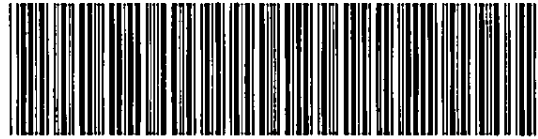
(Business Entity Name)

(Document Number)

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2021 JUL 12 PM 4:53

SECRETARY OF STATE
TALLAHASSEE, FL

A. Butler

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TJM Promas, Inc.
Name of Corporation

DOCUMENT NUMBER: PO16200003929

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

Please return all correspondence concerning this matter to the following:

Shannon Moore
Name of Contact Person

TJM Promas, Inc.
Firm/Company

511 NW 48th Ter
Address

Ocala, FL 34782
City/State and Zip Code

shannon.moore@tjmpromas.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Shannon Moore at (352) 291-5334
Name of Contact Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | |
|--|---|
| <input checked="" type="checkbox"/> \$35.00 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status |
| <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF CORRECTION

For

FILED

TJM Promas, Inc.

2021 JUL 12 PM 4:53

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

SECRETARY OF STATE
TALLAHASSEE, FL

PO6000003929

Document Number (if known)

Pursuant to the provisions of Section 607.0124, Florida Statutes.

These articles of correction correct 2021 FL For Profit Corporation Annual Report
(Document Type Being Corrected)

filed with the Department of State on 03/12/2021
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

Need to add Shannan Moore as Controller

Correct the inaccuracy, incorrect statement, or defect:

Shannan Moore

Controller

511 NW 48th Ter, Ocala, FL 34482

Trudi J. Moore

(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.)

Trudi Moore

(Typed or printed name of person signing)

VP

(Title of person signing)

Filing Fee: \$35.00

2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000003929

Entity Name: TJM PROMOS, INC.

Current Principal Place of Business:

511 NW 48TH TERRACE
OCALA, FL 34482

Current Mailing Address:

511 NW 48TH TERRACE
OCALA, FL 34482

FEI Number: 20-4030438

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MOORE, TRUDI
511 NW 48TH TERRACE
OCALA, FL 34482 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	VP	Title	P
Name	MOORE, TRUDI	Name	MOORE, MICHAEL J
Address	511 NW 48TH TERRACE	Address	511 NW 48TH TERRACE
City-State-Zip:	OCALA FL 34482	City-State-Zip:	OCALA FL 34482

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: TRUDI MOORE

VP

03/12/2021

Electronic Signature of Signing Officer/Director Detail

Date