

PO6000034494

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2006-03-22 10:50 AM

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06 MAR 22 AM 10:50

CLERK OF STATE
TALLAHASSEE, FLORIDA

Pat Con/NC

T. Roberts MAR 29 2006

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FIGMENT GRAPHIC DESIGNER, INC.
(Name of Corporation)

DOCUMENT NUMBER: PO 60 000 34 94

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

Please return all correspondence concerning this matter to the following:

CAROLINE LARSON

(Name of Contact Person)

FAST WAY BOOKKEEPING SERVICES
(Firm/Company)

2818 COMMODITY CIRCLE STE 40
(Address)

ORLANDO - FL 32819
(City/State and Zip Code)

For further information concerning this matter, please call:

CAROLINE LARSON
(Name of Contact Person)

at (407) 370. 3686
(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

FIGMENT GRAPHIC DESIGNER, INC

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

P0600003494

Document Number (if known)

FILED
06 MAR 22 AM 10:50
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 CORPORATION NAME AND OFFICER DETAIL
(Document Type Being Corrected)


filed with the Department of State on 03/09/2006
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

THE NAME OF THE CORPORATION IS WRITTEN "DESIGNER";
IT SHALL BE: "FIGMENT GRAPHIC DESIGN, INC."

THE NAME OF THE PRESIDENT IS WRITTEN: "LUIZ MOURA";
AND IT SHOULD BE: "LUIZ MOURA; WITH A "Z".

Correct the inaccuracy, incorrect statement, or defect:


(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)

LUIZ MOURA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35.00