## P06000063456

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T. Roberts MAY 3 1 2006

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06 MAY 23 PM 12: 06

SECRETARY OF STATE

## **COVER LETTER**

Division of Corporations				
SUBJECT: AVION CONSULTING INC.  (Name of Corporation)  DOCUMENT NUMBER: 4060000003456				
The enclosed Articles of Correction and fee are submitted for filing.				
<u> </u>				
Please return all correspondence concerning this matter to the following:				
EDMUND KIZISTI ZAMMIT (Name of Contact Person)				
AVION CONSULTING INC				
1610 PORT AUE (Address)				
NAPLES, FL. 34104 (City/State and Zip Code)				
For further information concerning this matter, please call:				
KRISTI ZAMMIT at (239) 267-1373 (Name of Corrtact Person) (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	Street Address: Amendment Section Division of Corporations Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

## ARTICLES OF CORRECTION

	ARTICLES OF CORRECTION	
) ·	for	FILED
		06 MAY 23 5
	AVION CONSULTING THE Number of Corporation as currently filed with the Florida Dept. of State	06 MAY 23 PM 12: 06
		FALLAHASSEE, FLORIDA
	P06000063456	E. FLORIDA
	Document Number (if known)	
Pur the	rsuant to the provisions of Section 607.0124 or 617.0124, Florida States Articles of Correction within 30 days of the file date of the documents	utes, this corporation files ent being corrected.
Th	ese articles of correction correct AVION Consulting	Inc. (Corporation
	ed with the Department of State on MA-/ 1 2006 (File Date of Document)	
Spe	ecify the inaccuracy, incorrect statement, or defect:	
	THE ADDRESS IS INACCURATE AND KR	ISTI ZAMMIT
	SHOULD BE ADDED AS VICE PICESIDENT-	OFFICER OF
	AVION CONSULTING INC.	
		***************************************
Co	rrect the inaccuracy, incorrect statement, or defect:	
	1610 PORT AVE, NAPLES FL. 34 104	15 CORRECT ADDRESS.
	KRISTI ZAMMIT SHOULD BE ADDED AS VICE	PRESIDENT DEGRETT
	The state of the s	reconcer or recre
	2 let 2	
	(Signature of a director, president or other officer - if directors or officers not been selected, by an incorporator - if in the hands of the receiver, trus	Nave
	other court appointed fiduciary, by that fiduciary.)	
	English Zensen	2
	EDMUND ZAMMIT (Typed or printed name of person signing)	PRESIDENT (Title of person signing)
		· = +

Filing Fee: \$35.00