

P06000092323

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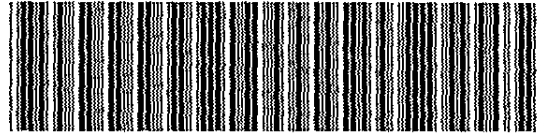
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DELFI SOD INC

(Name of Corporation)

DOCUMENT NUMBER: P0600092323

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

Please return all correspondence concerning this matter to the following:

DELFIDIO AGUILAR LOPEZ

(Name of Contact Person)

DELFIDIO SOD INC

(Firm/Company)

1104 INGLEWOOD RD APT 17

(Address)

GIBSONTOWN, FL. 33534

(City/State and Zip Code)

For further information concerning this matter, please call:

LUIS A TREJO

(Name of Contact Person)

at (813) 600-9147

(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

DELFI SOD INC

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

P0600092323

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 ARTICLE V11

(Document Type Being Corrected)

filed with the Department of State on 07/13/2006

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

ARTICLE V11

the initial officer of the corporation first name

DELFIDIO AGUILAR LOPEZ instead of DELFINO AGUILAR LOPEZ

Correct the inaccuracy, incorrect statement, or defect:

DELFIDIO AGUILAR LOPEZ instead of DELFINO AGUILAR LOPEZ

DELFI SOD INC

1104 INGLEWOOD RD APT 17

GIBSONTONT, FL. 33534

P06000092323

Incorrect name of initial director:

Delfidio Lopez

(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.)

DELFIDIO LOPEZ

(Typed or printed name of person signing)

P.D.

(Title of person signing)

Filing Fee: \$35.00

FILED
06 JUL 20 PM 07
CLERK OF STATE
TALLAHASSEE, FLORIDA