## P06000/0224/

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## **COVER LETTER**

TO:

Amendment Section Division of Corporations

PROPERTY DAMAGE PHOTOS, INC. **SUBJECT:** (Name of Corporation) P06000102241 **DOCUMENT NUMBER:** The enclosed Articles of Correction and fee are submitted for filing. Please return all correspondence concerning this matter to the following: BEVERLY WILLIAMS (Name of Contact Person) (Firm/Company) 2419 NW 81 Ter. (Address) Miami, FL 33147 (City/State and Zip Code) For further information concerning this matter, please call: BEVERLY WILLIAMS (Name of Contact 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 \$52.50 Filing Fee, Certificate of Status & Certified Copy **★** \$43.75 Filing Fee & Certified Copy Mailing Address: **Street Address:** Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF CORRECTION

for

PROPER	TY DAMAGE PHOTOS, 1	inc. , & 🔨
Name of Corpora	tion as currently filed with the Florida Dept	i. of State
	P06000102241	E COLON
<del></del>	Document Number (if known)	
Pursuant to the provisions of Section 6 these Articles of Correction within 30 c	07.0124 or 617.0124, Florid days of the file date of the do	a Statutes, this corporation files ocument being corrected
These articles of correction correct	Articles of Incor	poration ,P
filed with the Department of State on _	August 7, 2006 (File Date of Document)	
Specify the inaccuracy, incorrect stater	ment, or defect:	
Name of Corporation		
	- i to the same of	
Correct the inaccuracy, incorrect staten	nent, or defect:	
HOME & PROPERTY PHOTOS,	INC.	
		,
not been selected, by	r, president or other officer - if directors or an incorporator - if in the hands of the recei fiduciary, by that fiduciary.)	officers have iver, trustee, or
Angela C. Denise McCoy,	and the second	
**/		President
(Typed or printed name of person signif	12)	(Title of person signing)

Filing Fee: \$35.00