

PO6000/08222

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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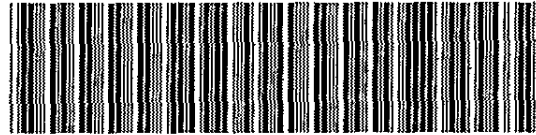
(Business Entity Name)

(Document Number)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

T. Roberts SEP 06 2006

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: IDA-KN INC

(Name of Corporation)

DOCUMENT NUMBER: P06000108222

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

Please return all correspondence concerning this matter to the following:

Georgia A Atchison

(Name of Contact Person)

Fiducial/E K Williams & Co

(Firm/Company)

PO Box 541014

(Address)

Merritt Island, FL 32954-1014

(City/State and Zip Code)

For further information concerning this matter, please call:

Georgia A Atchison

(Name of Contact Person)

at (321) 452-5854

(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

IDA-KN INC

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

P06000108222

Document Number (if known)

FILED

06 SEP -5 AM 8:59

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 Articles of Incorporation
(Document Type Being Corrected)

filed with the Department of State on August 18, 2006
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

Article VII; P/T Jose Garcia 4520 W New haven Ave melbourne, FI 32904

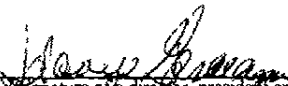
Should not be listed as an officer:

VP/S Idanerys Garcia---Title is incorrect

Only one initial officer should be shown

Correct the inaccuracy, incorrect statement, or defect:

Title: P/T Idanerys Garcia 4520 W New Haven Ave Melbourne, FI 32904



(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.)

Idanerys Garcia

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35.00