

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0380

From:

Account Name : CHECKMATE Account Number : I20030000146 Phone : (941)922-2801 Fax Number : (941)022

COR AMND/RESTATE/CORRECT OR O/D RESIGN

K. WOFFORD CONSTRUCTION, INC.

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	Certified Copy	0
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#UG # 05-	Estimated Charge	\$35.
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Corporate Filing Menu

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8/18/2006

V. Castin AUG 2 1 2000



TO: Amendment Section Division of Corporations

COVER LETTER

SUBJECT: K. WOFFORD CONS	STRUCTION, INC.	
DOCUMENT NUMBER: P060001	(Name of Corporation)	
The enclosed Articles of Correction and i	fee are submitted for filing	
Please return all correspondence concerni	U	
Flease return an correspondence concerns	ing this matter to the following.	
LEAH HARN		
(Name of Cuntact Person)		
CHECK MATE		
(Firm/Computy)		
4411 BEE RIDGE ROAD, #257	,	
(Address)		
SARASOTA, FL 34233		3
(City/State and Zip Code)	*************************************	P 84 .
For further information concerning this m	latter, please call:	٦,
LEAH HARN	at (941) 922-2801	. ?-
(Name of Confact Ferson)	(Area Code & Dayisme Telephone Number)	-2,447
Enclosed is a check for the following amo	ount:	
☑ \$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

K. WOFFORD CONSTRUCTION, INC.

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K. WOFFOR	D CONSTRUCTION, INC.		~	CAOA MA
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	Document Number	(if known)	_	P
	visions of Section 607.0124 or 617 projection within 30 days of the file			files
These articles of co	rrection correct ARTICLES OF	- INCORPORA (Document Type Being Co	(TION	
filed with the Depa	rtment of State on AUGUST 18,	2006	:	
• •	racy, incorrect statement, or defect: - INCORRECT MIDDLE II	•	FFICER/OWNE	:R
(KENNET	H K. WOFFORD, PRESIDE	NT)		
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<u>,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>				
	acy, incorrect statement, or defect: MIDDLE INITIAL FOR OF		R SHOULD BE '	'D"
(KENNET	H D. WOFFORD, PRESIDE	ENT)		
*				
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	<i>I</i>		****	
	Signature of a display, prostease of other of not been selected by an incorporator - if in other court appointed fiduciary, by that fidu	Note: - if directors or officers the hands of the receiver, true cisry.)	have too, or	
OTALEMA 1	A/FIDS SAAI			_

STALEY A. WEIDMAN

(Typed or printed name of person signing)

INCORPORATOR

(Title of person signing)

Filing Fee: \$35,00