## P06080138496

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## **COVER LETTER**

<b>TO:</b> Amendment Section Division of Corporations	, ,
SUBJECT: CRISTEL Dev	relopment CORP (Name of Corporation)
DOCUMENT NUMBER: P060	00/38496
The enclosed Articles of Correction and t	fee are submitted for filing.
Please return all correspondence concern	ing this matter to the following:
RICARdo Perdo (Name of Contact Person)	- CINE O
RPC Consult	lag Corp
243 Le Awood	Circle
MAPLES - FL (City/State and Zip Code)	34104
For further information concerning this not the Record Report (Name of Contact Person)	natter, please call:  2 at (23) 44-7-33  (Area Code & Daytime Telephone Number)
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 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF CORRECTION

for	
CRISTEL Development Corp	
Name of Corporation as currently filed with the Florida Dept. of State	
P06000/38494  Document Number (if known)	
Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation hese Articles of Correction within 30 days of the file date of the document being corrected.	files
These articles of correction correct <u>ORTicles OF Tacorporation</u> , (Document Type Being Chriceted)	
iled with the Department of State on (File Date of Document)	
Specify the inaccuracy, incorrect statement, or defect;  VP NAME FIRE Ely Gutternez	<u>.</u>
——————————————————————————————————————	
	<del></del>
Correct the inaccuracy, incorrect statement, or defect:  VP Should be CRISTINA GUTIERREZ	
	200
AHAS	NON 300
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L'adhever "55	DW J
(Signature of a director, president or other officer - if directors or officers have not been referred, by an incorporator - if in the hands of the receiver, trustee, or other routh appointed fiduciary, by that fiduciary.)	
Radius Pars.	
(Typed or printed name of person signing)  (Title of person signing)  (Title of person signing)	Î .
Filing Fee: \$35.00	