

PD7000036134

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

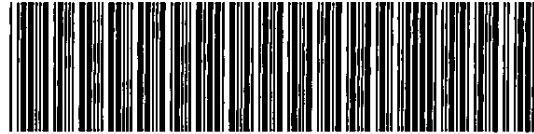
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900094589299

03/28/07--01022--024 \*\*52.50

FILED  
07 MAR 28 AM 10:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Art. of  
CORR.  
SP

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Representative Payee, Inc.

(Name of Corporation)

**DOCUMENT NUMBER:** P07000036134

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

Please return all correspondence concerning this matter to the following:

Mrs. Niva J. Telfort

(Name of Contact Person)

Representative Payee, Inc.

(Firm/Company)

6541 SW 30th Street

(Address)

Miramar, FL. 33023

(City/State and Zip Code)

For further information concerning this matter, please call:

Mrs. Niva J. Telfort

at ( 786 ) 728-7187

(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

☐ \$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

Representative Payee, Inc.

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

P07000036134

\_\_\_\_\_  
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 Articles of Incorporation,  
(Document Type Being Corrected)

filed with the Department of State on 3/21/07,  
(File Date of Document)

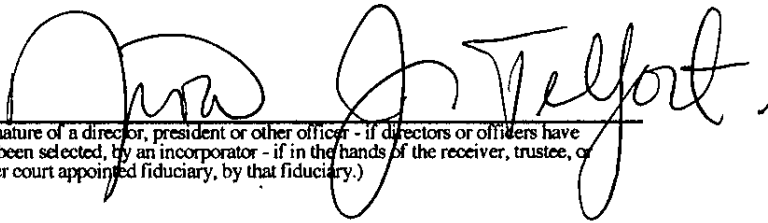
Specify the inaccuracy, incorrect statement, or defect:  
Under officers, there was no name filed.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

FILED  
07 MAR 28 AM 10:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Correct the inaccuracy, incorrect statement, or defect:  
Under officer it should reflect Niva J. Telfort as President.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

  
(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.)

Niva J. Telfort

\_\_\_\_\_  
(Typed or printed name of person signing)

President

\_\_\_\_\_  
(Title of person signing)

**Filing Fee: \$35.00**