

PO7000072301

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(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

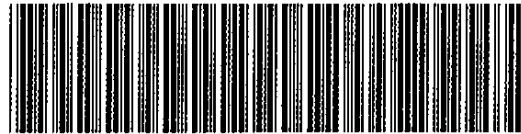
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## ARTICLES OF CORRECTION

for

Caribbean Pipe Supply, Inc.

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

P07000072301

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 Article I

(Document Type Being Corrected)

filed with the Department of State on June 21, 2007

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

spelling of name (company) should be  
Caribbean Pipe Supply, Inc.

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 JUL - 3 PM 1:39

Correct the inaccuracy, incorrect statement, or defect:

Caribbean Pipe Supply, Inc.

Chris Fulton  
(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.)

CHRIS FULTON

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35.00

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Caribbean Pipe Supply Inc.  
(Name of Corporation)

DOCUMENT NUMBER: P07000072301

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

Please return all correspondence concerning this matter to the following:

Christopher Fulton  
(Name of Contact Person)

Caribbean Pipe Supply, Inc.  
(Firm/Company)

2906 S. Douglas Road  
(Address)

Coral Gables, FL 33134  
(City/State and Zip Code)

For further information concerning this matter, please call:

Christopher Fulton at (305) 476-0111  
(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