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8/6/07

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CASINO OPTICAL, INC.
(Name of Corporation)

DOCUMENT NUMBER: 907 0000 84332

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

Please return all correspondence concerning this matter to the following:

MAYA PORTAL
(Name of Contact Person)

CASINO OPTICAL, INC.
(Firm/Company)

2285 WEST 80TH ST. BAY #7
(Address)

HIALAEAH FLORIDA 33016
(City/State and Zip Code)

For further information concerning this matter, please call:

MAYA PORTAL at (954) 496-2771
(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

CASINO OPTICAL, INC.

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

P070000 84332

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 VII
(Document Type Being Corrected)

filed with the Department of State on 7/25/07
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

SEC ALEXANDER PORTAL

Correct the inaccuracy, incorrect statement, or defect:

SEC ALEXANDER POLANCO

⊗ Maya Portal

(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.)

MAYA PORTAL

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35.00

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