

P07000090929

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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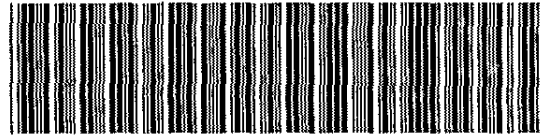
(Business Entity Name)

(Document Number)

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C. Coullotte SEP 11 2007

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Morgan Training Concepts Inc.
(Name of Corporation)

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Stephanie Morgan
(Name of Contact Person)

Morgan Training Concepts Inc.
(Firm/Company)

PO Box 1264
(Address)

Lake Alfred FL, 33850
(City/State and Zip Code)

For further information concerning this matter, please call:

Stephanie Morgan at (863) 287-7038
(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

