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•		
(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
<u>.</u>		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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10/19/07--01026--009 **35.00

Articles of Cometion

10-23-07

COVER LETTER

TO: Amendment Section Division of Corporations	•	
SUBJECT: LIGHT/ DOCUMENT NUMBER: PO	NOUSE MIAMI INC	
The enclosed Articles of Correction and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
(Name of Contact Person)		
malighthouse miami inc		
1416 Ne 27 de		
WILTER MAN W FL 33334		
For further information concerning this matter, please call:		
Lawen Fabian at 954 630 2232 (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	Street Address: Amendment Section Division of Corporations	
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF CORRECTION
for F
lighthouse miami inchiations and
Name of Corporation as currently filed with the Florida Dept. of State POTOOOLO999 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 Florida Droct Corp., (Document Type Being Corrected) filed with the Department of State on /0/04/07 (File Date of Document)
Specify the inaccuracy, incorrect statement, or defect: Paul Payme as treasurer.
Correct the inaccuracy, incorrect statement, or defect: Remove Paul Parme on treasurer
AT-1
(Signature of a director, president of other officer - if directors or officers have not been selected, by any incorporator - if in the hands of the receiver, trustee, or other court appointed iduciary, by that fiduciary.)
Lawen Fabian Oves (Typed or printed name of person signing) Oves (Title of person signing)

Filing Fee: \$35.00