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Art. Corock

COVER LETTER

TO: Amendment Section

Division of Corporations	Division of Corporations		
() Davi	Woman of Harida 200 1101,06		
DOCUMENT NUMBER: FO /C	200 1101,06		
The enclosed Articles of Correction and fee	e are submitted for filing.		
Please return all correspondence concerning	g this matter to the following:		
Caral Kefka	920 172 		
The greature (Firm/Company)	Horida Woman, Inc		
2245 NN 14	ST		
Delray Bok (Cyty/State and Zip Code)	H. 33115		
For further information concerning this matter, please call:			
Car of Contact Person)	Zat (56/) 272-6797 (Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amou	nt:		
\$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

Name of Corporation as currently filed with the Floridad Popt of State	
POTONICA SECRETARY OF SPATE Document Number (in Arto ALE, FLORIDA	
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 The articles of Jucary of (Document Type Being Operated)	15/07
filed with the Department of State on 10/4/07 Affective //	15/07
Specify the inaccuracy, incorrect statement, or defect: The heater Woman of House The inaccuracy name to be	
charged to	
Correct the inaccuracy, incorrect statement, or defect:	
The Greater Horida Woma.	refre
SEC	o 7 00
(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	FILED
other court appointed fiduciary, by that fiduciary.) CAROL LEKOWITZ (Typed or printed name of person signing) (Title of person signing)	ယ္

Filing Fee: \$35.00