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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT:	FIORENTINA LAZO PA
	(Name of Corporation)
DOCUMENT NUMBER:	P07000121374

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

Please return all correspondence concerning this matter to the following:

FLORENTINA LAZO

(Name of Contact Person)

FLORENTINA LAZO PA

(Firm/Company)

15343 SW 147 CT

(Address)

MIAMI FL 33187

(City/State and Zip Code)

For further information concerning this matter, please call:

FLORENTINA LAZO at (

786 247-7424 (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

S35.00 Filing Fee

✓ \$43.75 Filing Fee & Certificate of Status

\$43.75 Filing Fee & Certified Copy

S52.50 Filing Fee, Certificate of Status & Certified Copy

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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Street Address:

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF CORRECTION

for

FIORENTINA LAZO PA

Name of Corporation as currently filed with the Plonda Dept. of Mate

P07000121374

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.

Specify the inaccuracy, incorrect statement, or defect: Name of Corporation: FIORENTINA LAZO PA

Article VII

Title: VP

Fiorentina Lazo

Correct the inaccuracy, incorrect statement, or defect: Name of Corporation: FLORENTINA LAZO PA

Article VII

Title: VP

FLORENTINA LAZO

(Signature of a director, president of other officer - if directors or officers have not been selected, by an indopenditor - if in the hands of the receiver, trustee, or other court appointed fiducary, by that fiduciary.)

FLORENTINA LAZO

VP

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(Typed or printed name of person signing)

Filing Fee: \$35.00