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TO:

Amendment Section Division of Corporations

SUBJECT: Meter Doube H	Name of Corporation		
DOCUMENT NUMBER: Pojood	0126477		
The enclosed Articles of Correction and f	ee are submitted for filing.		
Please return all correspondence concerning this matter to the following:			
Lyis A. Alyarez (Name of Contact Person)			
Matro-DASE Hollow 11	NETAL DOOR, INC.		
15841 Pines Blud # 272			
Pambroke Pines, Pl (City/State and Zip Code)	33027		
For further information concerning this matter, please call:			
Luis A. Alunce 2 (Name of Contact Person)	at (<u>786</u>) <u>942-1270</u> (Area Code & Daytime Telephone Number)		
	-		
Enclosed is a check for the following amo	ount:		
□ \$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	Clifton Building		
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301		

ARTICLES OF CORRECTION

for

MELEO-DAGE HOLLOW METAL	Doors, Inc.
Name of Corporation as currently flied with the Profit	ia Dept. of State
Honoo 124477 Document Number (if known)	
Pursuant to the provisions of Section 607.0124 or 617.0124, F these Articles of Correction within 30 days of the file date of the	
These articles of correction correct Electronic Action (Document	Type Being Corrected)
filed with the Department of State on Muember (File Date of Docum	2007 SE S
Specify the inaccuracy, incorrect statement, or defect:	HATA C
1. THE word Hollow was miss,	DE//. HALLOWER P [
2. THE Address to the Busines.	
Correct the inaccuracy, incorrect statement, or defect:	
The company name and Address	ss Should Lead
As follows:	
MEtro-DAGE HOVIOW METAL I	pors Inc
15841 Pines Blud #27	•
	3037
Signiture of a director, president or other officer - if direct not been selected, by an incorporator - if in the hands of to other court appointed fiduciary, by that fiduciary.)	ctors or officers have the receiver, trustee, or
	_
Luis A. Aluare 2 (Typed or printed name of person signing)	Title of person signing)

Filing Fee: \$35.00