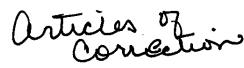
## P07000131900

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## COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: BALL PERSO	DNNEL SERVICES, INC.	
DOCUMENT NUMBER:	P07000131906	
The enclosed Articles of Correction and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
CHRISTI (Name of Contact Person)	INA M. BALL	
	•	
(Firm/Company)		
1249 CAPE CHARLES (Address)	AVE.	
ATLANTIC BEACH, F		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
CHRISTINA M. BALL at (904 ) 247-1140 (Name of Contact Person) (Area Code & Daytime Telephone Number)		
	•	
Enclosed is a check for the following amor	unt:	
\$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:	Street Address:	
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	Clifton Building	
Tailahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	

## FILED

## ARTICLES OF CORRECTION

for

2001 DEC 21 AM 8: 55

BALL PERSONNEL SERVICESTALINGHASSEE, FLORIDA portition as currently filed with the Florida Devil of Services Name of Corporation as currently filed with the Florida Dept. of State P07000131906 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 <u>ARTICLES OF INCORPORATION</u> (Document Type Being Corrected) 12-14-07 filed with the Department of State on \_\_\_\_\_ Specify the inaccuracy, incorrect statement, or defect: CHRISTINE M. BALL Correct the inaccuracy, incorrect statement, or defect: CHRISTINA M. BALL (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 other court appointed fiduciary, by that fiduciary.)

CHRISTINA M. BALL

(Typed or printed name of person signing)

PRESIDENT/DIRECTOR (Title of person signing)

Filing Fee: \$35.00