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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: JAXRIDES, Inc.	Name of Corporation)	
DOCUMENT NUMBER: P0800002	25109	
The enclosed Articles of Correction and for	ee are submitted for filing.	
Please return all correspondence concerni	ng this matter to the following:	
Dean A Warrick		
(Name of Contact Person)		
Jaxrides, Inc.		
(Firm/Company)		
8130 Summer Palm CT		
(Address)		
Jacksonville FL. 32256 (City/State and Zip Code)		
For further information concerning this m	atter, please call:	
Dean A Warrick	at (904) 316-4210 (Area Code & Daytime Telephone Number)	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amo	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 P.O. Box 6327	Division of Corporations Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

FILED

ARTICLES OF CORRECTION

08 MAR 27 AM 10: 14

for

SECRETARY OF STATE TALLAHASSEE, FLORIDA

JAXRIDES, Inc.

Name of Corporation as currently filed with the Florida Dept. of State

P08000025109
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 Articles Of Incorporation
filed with the Department of State on 03/07/2008 (File Date of Document)
Specify the inaccuracy, incorrect statement, or defect:
WARRICK,DEAN A TITLE CEOD
NURSE, MARCIA D TITLE TDS
NURSE, CHRISTOPHER J TITLE PD
MCGRIFF, TERRY J TITLE CFOD
Correct the inaccuracy, incorrect statement, or defect:
WARRICK, DEAN A TITLE PDTS
NURSE, MARCIA D TITLE CEO
NURSE, CHRISTOPHER J TITLE COO
MCGRIFF, TERRY J TITLE CFOD
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(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.)
Dean A Warrick President
(Typed or printed name of person signing) (Title of person signing)

Filing Fee: \$35.00