## P08000025475

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Articles of Correction

TB 4-16-68

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
	Mobile Service, Inc
DOCUMENT NUMBER: \$08000 25475	
The enclosed Articles of Correction and fee	e are submitted for filing.
Please return all correspondence concerning this matter to the following:	
Tason Will: (Name of Contact Person)	٢
(Firm/Company)	
542 Reddick Cir	
Winter Haven Fr : (City/State and Zip Code)	<u> </u>
For further information concerning this matter, please call:	
Tason Will's (Name of Contact Person)	at (86) 528-855( (Area Code & Daytime Telephone Number)
, , ,	
Enclosed is a check for the following amount:	
\$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

for

Surshine Mobile Service, In 1988
POBODOD 25475  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 Correction correct   Articles   Articl
Specify the inaccuracy, incorrect statement, or defect:  Mailing address, principal  address, Registered Agent + PT's address  was wrong on Articles.
Correct the inaccuracy, incorrect statement, or defect:  Please change mailing address, principal address, Registered Agent of PT's address to
542 Reddick Circle Winter Haven FL 33884
(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.)
Typed or printed name of person signing)  (Typed or printed name of person signing)  (Title of person signing)

**Filing Fee: \$35.00**