| (Requestor's Name) | | |
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| (City/State/Zip/Phone #) | | |
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| PICK-UP WAIT MAIL | | |
| | | |
| (Business Entity Name) | | |
| , , | | |
| (Document Number) | | |
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| Certified Copies Certificates of Status | | |
| Continued dopped | | |
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| Special Instructions to Filing Officer: | | |
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Office Use Only



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Articles of Correction
TB 3-26-08

COVER LETTER

Amendment Section Division of Corporations

TO:

| SUBJECT: YOUR COMPANY'S | Composer Cauy, Inc. | |
|---|--|--|
| DOCUMENT NUMBER: POSOOO 2706 | | |
| The enclosed Articles of Correction and fe | e are submitted for filing. | |
| Please return all correspondence concerning this matter to the following: | | |
| Candice Burns (Name of Contact Person) | · | |
| your Company's Computer Guy | | |
| 1301 Hampton Park Ln. | | |
| Melbourne, FL 329 | 40 | |
| For further information concerning this matter, please call: | | |
| Candice Burns (Name of Contact Person) | at (321) 693-2767 (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

| ARTICLES OF CORRECTION for Company's Competer Clay In C. Name of Corporation as currently filed with the Florida Dept. of State |
|--|
| ARTICLES OF CORRECTION |
| for |
| Name of Corporation as currently filed with the Florida Dept. of State |
| POCOCOS 7 06 Document Number (if known) |
| Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation files hese Articles of Correction within 30 days of the file date of the document being corrected. |
| These articles of correction correct Articles of Incorporation, (Document Type Being Corrected) |
| iled with the Department of State on (File Date of Document) |
| specify the inaccuracy, incorrect statement, or defect: |
| Secretary and Treasurer were left blank. |
| |
| Correct the inaccuracy, incorrect statement, or defect: |
| |
| Secretary and Treasurer both need to |
| be Candice Burns. |
| |
| |
| Maria Russa |
| (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.) |
| other court appointed inductary, by that fiductary.) |
| Christophe Buns (Typed or printed name of person signing) President (Title of person signing) |

Filing Fee: \$35.00