

PO8000028452

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:
Corrects document
by telephone call
on 4/18/08

Office Use Only



500121640215

04/01/08--01004--005 **35.00

Art of Call

FILED
08 APR 16 AM 11:05
CLERK OF STATE
TALLAHASSEE, FLORIDA

T. Roberts APR 18 2008



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 4, 2008

IBIS FARM, CORP
10324 FOX TRAIL S. RD #1109
WEST PALM BEACH, FL 33411

SUBJECT: IBIS FARM, CORP
Ref. Number: P08000028452

We have received your document for IBIS FARM, CORP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is a **PROFIT** corporation it must be signed by a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

If the corporation is a **NOT FOR PROFIT** corporation it must be signed by the chairman or vice chairman of the board, president or other officer - if directors have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

Please clarify additional pages. If you have more than one page with corrections, please number your pages. (3 pages)

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 108A00020083

RECEIVED
2008 APR 16 10:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: IBIS FARM, CORP

(Name of Corporation)

DOCUMENT NUMBER: P08000028452

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Monique Loehrer

(Name of Contact Person)

IBIS FARM, CORP

(Firm Company)

10324 FOX TRAIL S. RD. #1109

(Address)

WEST PALM BEACH, FL. 33411 US

(City State and Zip Code)

For further information concerning this matter, please call:

Monique Loehrer

(Name of Contact Person)

at (561) 616-7246

(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

IBIS FARM, CORP

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

P08000028452

Document Number (if known)

FILED
08 APR 16 AM 11:05
SECRET
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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 P08000028452

(Document Type Being Corrected)

filed with the Department of State on MARCH 18, 2008

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

ARTICLE VII

TITLE: P,S

ANDRE LOEHRER

10324 FOX TRAIL S. RD. #1109

WEST PALM BEACH, FL. 33411 US

Correct the inaccuracy, incorrect statement, or defect:

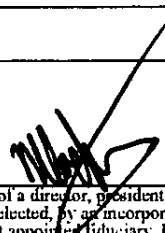
ARTICLE VII

TITLE: VP,S

LAUREN F BRIGGS

711 FOREST CLUB DRIVE #401

WELLINGTON, FL. 33414 US


(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.)

Monique Lochner
(Typed or printed name of person signing)

Director
(Title of person signing)

Filing Fee: \$35.00

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for

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WEST PALM BEACH, FL. 33411 US

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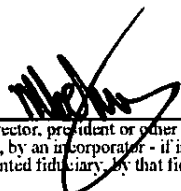
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MONIQUE LOEHRER

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Monique Lochrer
(Typed or printed name of person signing)

Director
(Title of person signing)

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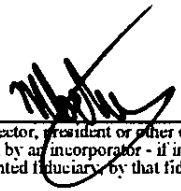
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