108000056953

(Requestor's Name)
(Address)
(100.000)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900131166539

06/16/08--01033--001 **35.00

Arty Cou

SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Frank Sanchez (Name of Co	poration)	
DOCUMENT NUMBER: <u>P08000056953</u>		
The enclosed Articles of Correction and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Frank Sanchez (Name of Contact Person)		
Frank sanchez inc	<u></u>	
6231 FairLawn Dr		
Orlando 71 32809 (City/State and Zip Code)		
For further information concerning this matter, please call:		
Frank Sanchez at (3	321 331 5510 (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:		
★ \$35.00 Filing Fee	3.75 Filing Fee & Certificate of Status	
\$43.75 Filing Fee & Certified Copy \$5	2.50 Filing Fee, Certificate of Status & Certified Copy	
Amendment Section Amer Division of Corporations Divis P.O. Box 6327 Clifto Tallahassee, FL 32314 2661	et Address: Indiment Section Ission of Corporations In Building Executive Center Circle Indianal Section Secti	

ARTICLES OF CORRECTION

ARTICLES OF CORRECTION FILED
TOT UNITED STATE OF THE PARTY O
Frank Sanchez Inc. Name of Corporation as currently filed with the Florida Dept. of State PO8000056953
P08000056953
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 (Document Type Being Corrected)
filed with the Department of State on
Specify the inaccuracy, incorrect statement, or defect: OFFICER / DIVECTOR DETAIL NAME EADDRESS
Says Mone
Correct the inaccuracy, incorrect statement, or defect:
Officer/Director Detail Name & Address
should say: Frank Sanchez
9231 1411 14W11 DI
orlando 71 32809 US
tes
(Signature of a director, president or other officer - if directors or officers have not been selected, by an incorporate - if he hands of the receiver, trustee, or
other court appointed fiduciary, by that fiduciary.)
Frank Sanchez (Typed or printed name of person signing) (Title of person signing)

Filing Fee: \$35.00