

PO 800006/331

(Requestor's Name)

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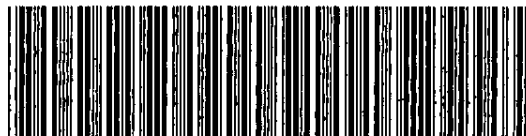
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Articles of  
Correction

SG

7-14-08

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Awesome Distributors Corp  
(Name of Corporation)

DOCUMENT NUMBER: P08000061331

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

Please return all correspondence concerning this matter to the following:

Alina Dominguez  
(Name of Contact Person)

\_\_\_\_\_  
(Firm/Company)

1110 SW 126 Place  
(Address)

Miami, FL 33184  
(City/State and Zip Code)

For further information concerning this matter, please call:

Alina Dominguez at (786) 546-8730  
(Name of Contact Person) (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

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

P08000061331  
Document Number (if known)

FILED  
2008 JUL 10 AM 6:50  
SECRETARY 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 Florida Profit corporation  
(Document Type Being Corrected)

filed with the Department of State on 6/24/08  
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

Officer/Director Name — Dominguez, Danny  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Correct the inaccuracy, incorrect statement, or defect:

Officer/Director Name — Dominguez, Daniel Jose  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Alina Dominguez  
(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.)

Alina Dominguez  
(Typed or printed name of person signing)

Director  
(Title of person signing)

Filing Fee: \$35.00