

P08000070317

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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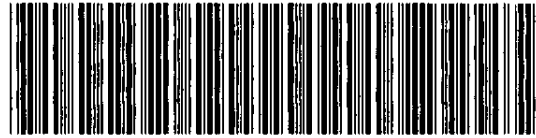
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Articles of Correction
Thurs
8-27

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LESLIE SERVICES CORPORATION
(Name of Corporation)

DOCUMENT NUMBER: PO8000070317

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

Please return all correspondence concerning this matter to the following:

LLunaisy Acauda
(Name of Contact Person)

LESLIE SERVICES CORPORATION
(Firm/Company)

816 West 39 Place
(Address)

Hialeah, FL. US 33012
(City/State and Zip Code)

For further information concerning this matter, please call:

LLunaisy Acauda at (786) 879-6356
(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

LESLIE SERVICES CORPORATION

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

PO8000070317

Document Number (if known)

FILED

2008 AUG 20 AM 8:02

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

Electronic Articles of Incorporation

(Document Type Being Corrected)

filed with the Department of State on

07/25/2008

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

1116 WEST 39 PLACE

HiALEAH, FL. US 33012.

Correct the inaccuracy, incorrect statement, or defect:

816 WEST 39 PLACE

HiALEAH, FL. US 33012.

Llunaisy AEAUDA

(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.)

Llunaisy AEAUDA

(Typed or printed name of person signing)

President.

(Title of person signing)

Filing Fee: \$35.00