1-08000724436

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

Office Use Only

8-22-08



300134530113

08/19/08--01011--023 **35.00

My des on Connect on

2000 AUG 19 PM 8: 53
SECRETARY OF STATE
TALL AHASSEF, FLORID.

COVER LETTER

TO:

Amendment Section Division of Corporations

SUNSHINE PERFUMES INC DOCUMENT NUMBER: 06806072436 The enclosed Articles of Correction and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Sunshine perfumes Inc 12201 N.W 35th St. coval spring FL 33065 For further information concerning this matter, please call: 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: Street Address: Amendment Section Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF CORRECTION

for

SECRETARY OF STATE

	PERFUMES		TAHASSEE, FLORE
Name of Corpo	ration as currently filed with the Florida Dep	t. of State	
	A .		

108000072436

70000012170
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 FURION PLOFIT CORPORATION FILING, (Document Type Being Corrected)
filed with the Department of State on (File Date of Document).
Specify the inaccuracy, incorrect statement, or defect: Om: Hel an officer
Correct the inaccuracy, incorrect statement, or defect:
Nome Shalom, Ellen
Street aldress, 12201 N.W. 3520 St
City State: Coral Springs, FL 33065
· · · · · · · · · · · · · · · · · · ·
Refenature of a chector, 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.)
Betty Salen (Typed or printed name of person signing) (Title of person signing)

Filing Fee: \$35.00