

P08000085572

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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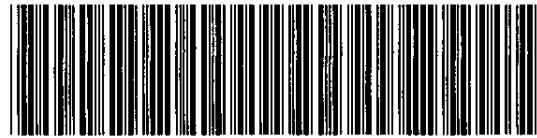
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Ant. & Con.

CC

SEP 24 2008

A & S Financial Services Inc.

Accounting and Tax Service

12730 New Brittany Blvd., Suite 440, Ft. Myers, FL 33907

(239)931-9130 Office – (239)931-0395 FAX

***PLEASE SEND COPY OF CORRECTION TO THE ADDRESS
ABOVE A-S FINANCIAL 12730 NEW BRITTANY BLVD
SUITE -440 FT MYERS FL 33907
TKS SEND TO ALLEN FAYER -AS TKS***

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ALFREDO MACHUCA LANDSCAPING, INC.
(Name of Corporation)

DOCUMENT NUMBER: PO8000085572

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

Please return all correspondence concerning this matter to the following:

ALLEN FOYER
(Name of Contact Person)

ABS Financial
(Firm/Company)

12330 NW BRITTANY BLVD #440
(Address)

FT MYERS FL 33907
(City/State and Zip Code)

For further information concerning this matter, please call:

_____ at (_____) _____
(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

ALFREDO MACHUCA LANDSCAPING INC
Name of Corporation as currently filed with the Florida Dept. of State

P 08 000085571
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 OFFICER - NAME
(Document Type Being Corrected)

filed with the Department of State on 09-16-2008
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

SANCHEZ, ALFREDO - TITLE - P
SANCHEZ, MARIA AD - TITLE - V.P.

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TALLAHASSEE, FLORIDA

Correct the inaccuracy, incorrect statement, or defect:

MACHUCA, ALFREDO - TITLE - P
MACHUCA, MARIA-DEL C. TITLE - VP

Alfredo Machuca
(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.)

Alfredo Machuca
(Typed or printed name of person signing)

RA
(Title of person signing)

Filing Fee: \$35.00