## P0900005873

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SUBJECT: NATURAL ELOQUEANCE INC		
(Name of Corporation)  DOCUMENT NUMBER: P09000005873		
DOCUMENT NUMBER.		
The enclosed Articles of Correction and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
SHERRY PIERSON		
(Name of Contact Person)		
NATURAL ELOQUENCE INC		
(Firm/Company)		
755 AMHURST DR		
(Address)		
ORANGE CITY, FL 32763 (City/State and Zip Code)		
For further information concerning this matter, please call:		
SHERRY PIERSON	at ( 386 775-8712 (Area Code & Daytime Telephone Number)	
(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

NATURAL ELOQUEANCE IN	С
Name of Corporation as currently filed with the Florida De	ot, of State
P09000005873	
Document Number (if known)	<del>-</del>
Pursuant to the provisions of Section 607.0124 or 617.0124, Florid these Articles of Correction within 30 days of the file date of the d  These articles of correction correct ARTICLES OF INCORF (Document Type)  filed with the Department of State on 01/20/2009  (File Date of Document)	
Specify the inaccuracy, incorrect statement, or defect: THE NAME OF THE CORPORATION WAS TYPE	PED INCORRECTLY.
	AACC 9
	AE A
Correct the inaccuracy, incorrect statement, or defect: THE CORRECT NAME OF THE CORPORATION IS N	ATURAL ELOQUENCE INC
(Signature of a director, president or other officer - if directors of the following of the reconstruction of the following of the followin	or officers have beiver, trustee, or
SHERRY PIERSON	PRESIDENT
(Typed or printed name of person signing)	(Title of person signing)

Filing Fee: \$35.00