## P09000010931

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Art Correction
Name Chs
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## **COVER LETTER**

TO:

Amendment Section Division of Corporations

SUBJECT: FHOTOGENIX INC		
DOCUMENT NUMBER: P09000010931		
The enclosed Articles of Correction and fee	e are submitted for filing.	
Please return all correspondence concernin	g this matter to the following:	
FRANKLIN SANCHEZ		
(Name of Contact Person)		
(Firm/Company)	<del></del>	
1387 NE 180TH ST		
(Address)		
NORTH MIAMI BEACH FL 331	62	
(City/State and Zip Code)  For further information concerning this matter, please call:		
FRANKLIN SANCHEZ	at ( 786 ) 853-8577	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amou	nt:	
☑ \$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

## **FHOTOGENIX INC**

Name of Corporation as currently filed with the Florida Dept. of State
P09000010931
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 ARTICLES OF INCORPORATION  (Document Type Being Corrected)
filed with the Department of State on P0900010931  (File Date of Document)
Specify the inaccuracy, incorrect statement, or defect:
MISTYPE OF CORPORATION NAME ARTICLE I "FHOTOGENIX INC"
Comment the incomment incomment statement on defeat.
Correct the inaccuracy, incorrect statement, or defect:  CORPORATIONS NAME IN ARTICLE I TO "FOTOGENIX INC"
TOTAL TO TOTAL TO TOTAL
Said Sant Q
(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 appared tiduciary, by that fiduciary.

FRANKLIN SANCHEZ

(Typed or printed name of person signing)

**PRESIDENT** 

(Title of person signing)

Filing Fee: \$35.00