P0900001185

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correction w/NC
TB 2/26/09

COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT:LEXUS MANA	GMENT GROUP, INC	
(1	ame of Corporation)	
DOCUMENT NUMBER: P	09000011850	
The enclosed Articles of Correction and fe	e are submitted for filing.	
Please return all correspondence concernir	g this matter to the following:	
GIFFARD BULLEN		
(Name of Contact Person)		
(Firm/Company)		
PO BOX 621746		
(Address)		
ORLANDO, FL 32862		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
GIFFARD BULLEN	at (407) 489-3294 (Area Code & Daytime Telephone Number)	
(Name of Contact Person)	(Area Code & Daytime Telephone Number)	
	•	
	•	
Enclosed is a check for the following amount	ınt:	
\$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

FILED 2009 FEB 25 PM 12: 05 TALLAHASSEE. FLORIDA

LEXUS MANAGMENT GROUP, INC

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

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
			filed with the Department of State on	(Document Type Being Corrected) FEBRUARY 06, 2009 (File Date of Document)
Specify the inaccuracy, incorrect statement, o	r defect:			
THE NAME IS SPELL WRONG	(LEXUS MANAGMENT GROUP, INC)			
Correct the inaccuracy, incorrect statement, o LEXUS MANAGEMENT GROUP,	r defect: INC			
				
(Signature of a director, presider not been selected, by an incorp other court appointed fiduciary	nt or other officer - if directors or officers have orator - if in the hands of the receiver, trustee, or , by that fiduciary)			
Gifford Bullzn (Typed or printed name of person signing)	(Title of person signing)			

Filing Fee: \$35.00