

P09000016705

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

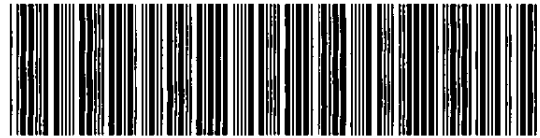
Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

12th

Office Use Only



600144364836

03/02/09--01015--014 \*\*52.50

FILED  
09 MAR 12 PM 4:35  
SECRETARY OF STATE  
ARTS & PASSPORTS

Art. of Correction  
w/  
Name Change

03/13/09

DC

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CARLTON C ROWAND REALTY INC

(Name of Corporation)

**DOCUMENT NUMBER:** P09000016705

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

Please return all correspondence concerning this matter to the following:

SCOTT E ABOLAFIA

(Name of Contact Person)

SCOTT E ABOLAFIA ENTERPRISES INC

(Firm/Company)

9461 HOLLYHOCK CT

(Address)

DAVIE, FL 33328

(City/State and Zip Code)

For further information concerning this matter, please call:

SCOTT E ABOLAFIA

(Name of Contact Person)

at ( 954 ) 294-3707

(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED  
2009 MAR 12 AM 8:00  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

March 4, 2009

SCOTT E. ABOLAFIA  
9461 HOLLYHOCK CT.  
DAVIE, FL 33328

SUBJECT: CARLTON C ROWAND REALTY INC  
Ref. Number: P09000016705

We have received your document and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

When changing the name of a corporation filed pursuant to chapter 607, Florida Statutes, to that of a professional service corporation filed pursuant to chapter 621, Florida Statutes, ~~the specific business purpose must also be added or changed to indicate what type of professional service the corporation will be rendering.~~

If the corporation is a **PROFIT** corporation it must be signed by a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

If the corporation is a **NOT FOR PROFIT** corporation ~~it must be signed by the chairman or vice-chairman of the board, president or other officer - if directors have not been selected by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.~~

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Connell  
Regulatory Specialist II

Letter Number: 209A00007419

# ARTICLES OF CORRECTION

for

**CARLTON C ROWAND REALTY INC**

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

**P09000016705**

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 **FEBRUARY 23, 2009**,  
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

**NAME OF CORPORATION**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

FILED  
09 MAR 12 PM 4:55  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Correct the inaccuracy, incorrect statement, or defect:

**CARLTON C ROWARD, P.A.**

**REAL ESTATE AGENT**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Carlton C Rowand*  
*SCOTT E ABOLAFIA*

(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.)

**CARLTON C ROWAND**  
**SCOTT E ABOLAFIA**

(Typed or printed name of person signing)

**President**  
**CPA**

(Title of person signing)

**Filing Fee: \$35.00**