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## **COVER LETTER**

Amendment Section Division of Corporations

TO:

SUBJECT: RESCUE MY HOMI	ES INC		
DOCUMENT NUMBER: P090000			
The enclosed Articles of Correction and fee			
Please return all correspondence concerning	g this matter to the following:		
PETER CAMACHO			
(Name of Contact Person)  CP ASSOCIATED SERVICE  (Firm/Company)	ES INC		
4545 FOREST HILL BLVD			
WEST PALM BEACH, FL 33415 (City/State and Zip Code)			
For further information concerning this matter, please call:			
PETER CAMACHO (Name of Contact Person)	_at (_561) 237-5520		
(Name of Contact Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:			
<b>✓</b> \$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

2009 APR 15 PM 12: 03

SECRE TARY OF STATE
TALLAHASSEE, FLORIDA

## RESCUE MY HOME INC

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

P0900030866	
Document Number (if known)	
Pursuant to the provisions of Section 607.0124 or 617.0124, Florida St these Articles of Correction within 30 days of the file date of the docur These articles of correction correct THE ARTICLES OF CORP	atutes, this corporation files nent being corrected.
These articles of correction correct(Document Type Being	Corrected)
filed with the Department of State on 4/6/2009 (File Date of Document)	·
Specify the inaccuracy, incorrect statement, or defect: ORIGINAL COMPANY NAME WAS INCORE	RECT.
Correct the inaccuracy, incorrect statement, or defect: RESCUE THE HOMES INC	
toter lamand	
(Signature of a director, president or other officer - if directors or office not been selected, by an incorporator - if in the hands of the receiver, tr other court appointed fiduciary, by that fiduciary.)	rs have ustee, or
Peter Camarola	President
(Typed or printed name of person signing)	(Title of person signing)

Filing Fee: \$35.00