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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: Haute Connoisseur Inc Name of Corporation DOCUMENT NUMBER: P09000044718 The enclosed Articles of Correction and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Saira Hotchandani Name of Contact Person Firm/Company 1173 Goshen Ave #101 Address Los Angeles, CA 90049 City/State and Zip Code sairahotchandani@gmail.com E-mail address. (to be used for future annual report notification) For further information concerning this matter, please call: Saira Hotchandani ր 798-1373 Name of Contact Person Enclosed is a check for the following amount: **✓** \$35.00 Filing Fee ■ \$43.75 Filing Fee & Certificate of Status \$52.50 Filing Fee, Certificate of Status & Certified Copy □ \$43.75 Filing Fee & 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



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

P09000044718 Document Number (if known)

booking (a movil)		
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 May 20, 2009 (File Date of Document)	nent)	
Specify the inaccuracy, incorrect statement, or defect:	•	
Aaron Sigmond added as an officer.		
	<u> </u>	
Correct the inaccuracy, incorrect statement, or defect:		
Remove Aaron Sigmond as an officer. The only officer	should be Haute Living, Inc.	
	,	
(Signature of a director, provident or other officer. If direct not been selected, by an incorporator - if in the hands of the other court appointed fiduciary, by that fiduciary.)	tors or officers have ne receiver, trustee, or	
Saira Hotchandani	Incorporator	
(Typed or printed name of person signing)	(Title of person signing)	
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Filing Fee: \$35.00