

P09000051704

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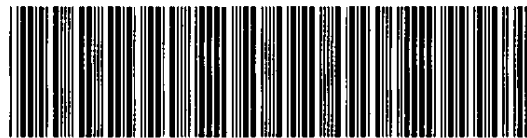
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2009 JUN 22 AM 11:28

FILED

Correction

TB

6/23/09

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BLUE ANGEL ADULT DAY CARE INC.
Name of Corporation

DOCUMENT NUMBER: P09000051704

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

Please return all correspondence concerning this matter to the following:

YOLANDA M CARRENO

Name of Contact Person

YOLANDA M CARRENO INC

Firm/Company

14750 SW 26 STREET STE 112

Address

MIAMI, FL 33185-5935

City/State and Zip Code

ycarreno@att.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

YOLANDA CARRENO

Name of Contact Person

at (305) 554-4032

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

ARTICLES OF CORRECTION

for

BLUE ANGEL ADULT DAY CARE INC

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

P09000051704

Document Number (if known)

FILED
2009 JUN 22 AM 11:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 ARTICLE OF INCORPORATION,
(Document Type Being Corrected)

filed with the Department of State on JUNE 15, 2009,
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

ARTICLE VII

TITLE: VP/S

MARIA D PEREZ

4780 SW 141 AVENUE

MIAMI, FL 33175

Correct the inaccuracy, incorrect statement, or defect:

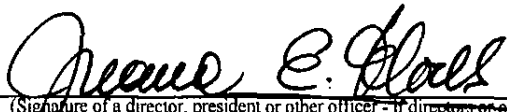
ARTICLE VII

TITLE: VP/S

MARIA DEL CARMEN DANIEL

4780 SW 141 AVENUE

MIAMI, FL 33175

x 
(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.)

JUANA E FLORES

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35.00