P09000060461

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me), ;
(Do	cument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: SINF & SAVE FO	od INC OF JACKSONVILLE		
DOCUMENT NUMBER: PO900060461			
The enclosed Articles of Correction and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
MOHAMARO BARAK Name of Contact Person	HiazzoH		
Slue, Save food Inc.	OF Jacksonvile		
2202 North Edgewood			
Joso FL 32254 City/State and Zip Code			
E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
MOHAMMED BARAK HUSSOIN Name of Contact Person	at (901) 662-33 % 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

August 7, 2009

MOHAMMED HOSSAIN 2202 NORTH EDEWOOD AVE JACKSONVILLE, FL 32254

SUBJECT: STOP & SAVE FOOD INC OF JACKSONVILLE

Ref. Number: P09000060461

We have received your document for STOP & SAVE FOOD INC OF JACKSONVILLE and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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) 245-6916.

Carol Mustain Regulatory Specialist II

Letter Number: 309A00027073

ARTICLES OF CORRECTION

for

Name of Corporation as cufrently filed with the Florida Dept. of State
Pogoobbothel 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 Address (File Date of Document Type Being Corrected) (File Date of Document) Specify the inaccuracy, incorrect statement, or defect: Address Address Whomes 2202 North Edgeward One 32254
Wronk NAME BARAK, Mollonmand Hosspin
Correct the inaccuracy, incorrect statement, or defect: Correct the inaccuracy, incorrect statement, or defect: 2202 Narth Edgeword Ove Sup H 3225+
Correct Nome Hossain, Moltanned BARAK
(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.)
John Hollanned Barak Hussain (Typed or printed name of person signing) (Title of person signing)

Filing Fee: \$35.00