

P/10000001256

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

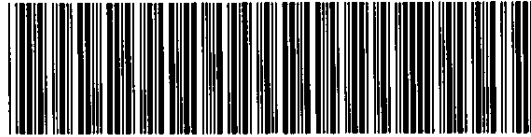
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100163910611

01/13/10--01001--006 **35.00

RECEIVED
10 JAN 12 PM 3:53
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
10 JAN 12 PM 4:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Art of Car w/N.C.
C.COULLETTE

JAN 12 2010

EXAMINER

FILINGS, INC. TERESA ROMAN

(Requestor's Name)

2805 LITTLE DEAL ROAD

(Address)

TALLAHASSEE, FLORIDA 32308

385-6735

(City, State, Zip)

(Phone #)

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. Adult Activities center of the Treasure Coast, Inc
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

Walk in Pick up time _____

Certified Copy

Mail out Will wait Photocopy

Certificate of Status

| NEW FILINGS | |
|--------------------------|-------------------|
| <input type="checkbox"/> | Profit |
| <input type="checkbox"/> | NonProfit |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication |
| <input type="checkbox"/> | Other |

| AMENDMENTS | |
|-------------------------------------|---------------------------------------|
| <input checked="" type="checkbox"/> | Amendment/Correction |
| <input type="checkbox"/> | Resignation of R.A., Officer/Director |
| <input type="checkbox"/> | Change of Registered Agent |
| <input type="checkbox"/> | Dissolution/Withdrawal |
| <input type="checkbox"/> | Merger |

| OTHER FILINGS | |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report |
| <input type="checkbox"/> | Fictitious Name |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/ QUALIFICATION | |
|--------------------------------|---------------------|
| <input type="checkbox"/> | Foreign |
| <input type="checkbox"/> | Limited Partnership |
| <input type="checkbox"/> | Reinstatement |
| <input type="checkbox"/> | Trademark |
| <input type="checkbox"/> | Other |

Examiner's Initials

ARTICLES OF CORRECTION

for

ADULT ACTIVITIES CENTER OF THE TREASURE COAST, INC.

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

P10000001256

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 CORPORATION
(Document Type Being Corrected)

filed with the Department of State on 01/06/2010
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

ARTICLE I THE NAME OF THE CORPORATION

ADULT ACTIVITIES CENTER OF THE TREASURE COAST, INC.

Correct the inaccuracy, incorrect statement, or defect:

ARTICLE I THE NAME OF THE CORPORATION SHALL BE

ADULT ACTIVITY CENTER OF THE TREASURE COAST, INC.

Teresa Roman

(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)

TERESA ROMAN

(Typed or printed name of person signing)

INCORPORATOR

(Title of person signing)

FILED
10 JAN 12 PM 4:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Filing Fee: \$35.00