

P10006015531

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: URBAN LOST, INC.

Name of Corporation

DOCUMENT NUMBER: P10000015531

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

Please return all correspondence concerning this matter to the following:

VIVIAN BATULE

Name of Contact Person

URBARN LOST, INC.

Firm/Company

4664 SW 72 AVENUE

Address

MIAMI FLA 33155

City/State and Zip Code

VIVIAN @EBATULE.COM

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

For further information concerning this matter, please call:

VIVIAN BATULE

Name of Contact Person

at (305) 297-6939

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

URBAN LOST, INC.

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

P10000015531

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 **ARTICLES OF INCORPORATION**

(Document Type Being Corrected)

filed with the Department of State on **FEBRUARY 19, 2010**

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

WE HEREBY CORRECT THE NAME OF THE CORPORATION TO:

URBAN LOFT, INC.

Correct the inaccuracy, incorrect statement, or defect:

WE HEREBY NAME TO CORPORATION URBAN LOFT, INC.

Vivian Batule

(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.)

VIVIAN BATULE

(Typed or printed name of person signing)

PRES

(Title of person signing)

Filing Fee: \$35.00

FILED
10 MAR -3 PM 3:00
STATE
TALLAHASSEE, FLORIDA