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C.COULLIETTE

MAR 19 2010

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: MINNIX AUTO BODY	SHOP & SALES INC	
DOCUMENT NUMBER: P10000020	•	
The enclosed Articles of Correction and for	ee are submitted for filing.	
Please return all correspondence concerni	ng this matter to the following:	
NANCY L MINNIX		
Name of Contact Person		
MINNIX AUTO BODY SHOP & SALE:	S INC	
15720 NE US HIGHWAY 301		
Address		
WALDO, FL 32694-4607 City/State and Zip Code		
E-mail address: (to be used for future annual r	report notification)	
For further information concerning this m	atter, please call:	
NANCY L MINNIX Name of Contact Person	at (352) 262-1556 Area Code & Daytime Telephone Number	
Enclosed is a check for the following amo	ount:	
✓ \$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:	Street Address:	
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	Clifton Building 2661 Executive Center Circle	
Tallahassee, FL 32314	Tallahassee, FL 32301	

ARTICLES OF CORRECTION

for

MININIX ALITO BODY SHOP & SALES INC.

Name of Corporation as currently filed with the Florida Dept. of State			
P1000020068			
Document Number (if known)			
Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, these Articles of Correction within 30 days of the file date of the document be	this corporation files sing corrected.		
These articles of correction correct NAME OF CORPORATION (Document Type Being Corrected)	,,		
filed with the Department of State on MARCH 5, 2010 (File Date of Document)			
Specify the inaccuracy, incorrect statement, or defect:			
MINNIX AUTO BODY SHOP & SALES INC			
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	第2 8	- 7467	
Correct the inaccuracy, incorrect statement, or defect:	SSI SSI 16	e i viti per	
MINNIX AUTO SALES & BODY SHOP, INC		3 [***]	
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(She lature of a director president or other bilicer - if directors or officers have not been selected, by all incorporator - if in the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.)		_	
NANCY L MINNIX	PRES	_	
(Typed or printed name of person signing)	(Title of person signing)		

Filing Fee: \$35.00

(Typed or printed name of person signing)