

P10000049896

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

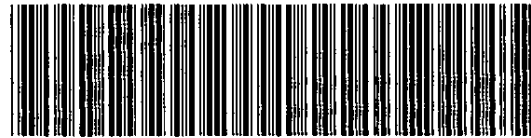
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Learning Insights, Inc.
Name of Corporation

DOCUMENT NUMBER: P10000049896

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

Please return all correspondence concerning this matter to the following:

Deborah Rappaport
Name of Contact Person

Benetrends, Inc.
Firm/Company

1180 Welsh Road, Suite 280
Address

North Wales, PA 19454
City/State and Zip Code

drappaport@benetrends.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Deborah Rappaport at (866) 423-6387
Name of Contact Person 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

Learning Insights, Inc.

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

P10000049896

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 June 11, 2010.
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

Name of corporation was incorrectly stated.

Correct the inaccuracy, incorrect statement, or defect:

The name of the corporation is: Greater Insights, Inc.

Deborah Rappaport
(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.)

Deborah Rappaport

(Typed or printed name of person signing)

Incorporator

(Title of person signing)

Filing Fee: \$35.00

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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA