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SECRETARY OF STATE

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TO:

Amendment Section Division of Corporations

SUBJECT: COMMUNITY FORCE INC DOCUMENT NUMBER: P10000057484 The enclosed Articles of Correction and fee are submitted for filing. Please return all correspondence concerning this matter to the following: RAVI-RAMASWAMY CPA Firm/Company 29 PERIWINKLE DRIVE MONMOUTH JUNCTION, NJ 08852. RAVIRPL@YAHOO.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: RAVI RAMASWAMY CPA 355-1640 Name of Contact Person Enclosed is a check for the following amount: \$35.00 Filing Fee ■ \$43.75 Filing Fee & Certificate of Status ✓ \$52.50 Filing Fee, Certificate of Status & Certified Copy ☐ \$43.75 Filing Fee & Certified Copy Mailing Address: Street Address: Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF CORRECTION

for

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Incorporator
(Title of person signing)

	COMMUNITY FORCE INC	
	P1000057484 Document Number (if known)	SECRETARY OF STATE TABLAHASSEE FLORID
•		
Pursuant to the provisions of these Articles of Correction	Section 607.0124 or 617.0124, Florida within 30 days of the file date of the doc	Statutes, this corporation files current being corrected.
These articles of correction of	correct ARTICLE OF INCORPORATION (Document Type Bo	TION .
filed with the Department of	المناف المستراء المناف	ing Corrected)
Specify the inaccuracy, income	rrect statement, or defect:	
COMMUNITY FORCE IN	IC	
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	,	
Correct the inaccuracy, incor	rrect statement, or defect:	
CommunityForce Inc.		
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	an Jamaswand	Horizon Laure
not be	nture of a director, president or other officer - if directors or of een selected, by an incorporator - if in the hands of the receiv court appointed fiduciary, by that fiduciary.)	rincers have er, trustee, or

Filing Fee: \$35.00

Ravi Ramaswamy CPA (Typed or printed name of person signing)