

P10000062547

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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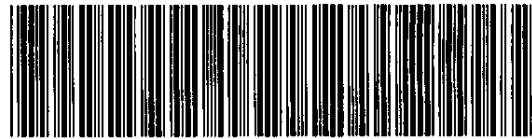
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CELATON ENTERPRISES, INC

Name of Corporation

**DOCUMENT NUMBER:** P10000062547

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

Please return all correspondence concerning this matter to the following:

Lindsay Scherr

Name of Contact Person

Firm/Company

P.O. BOX 312

Address

Boca Raton, FL 33429

City/State and Zip Code

LS@CELADONENTERPRISES.COM

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

For further information concerning this matter, please call:

LINDSAY SCHERR

Name of Contact Person

at ( 312 ) 399-3194

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

**CELATON ENTERPRISES, INC**

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

**P10000062547**

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 **July 29, 2010**  
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

**The name of the corporation "Celaton Enterprises, Inc" should be spelled**

**"Celadon Enterprises, Inc." The word "Celadon" is spelled with a "d", not a "t".**


**Please call me if there is any confusion about this. Thank you.**

Correct the inaccuracy, incorrect statement, or defect:

**Please change the effective date from July 30, 2010 to August 1, 2010.**

**Please add HWY after Federal on "the principal place of business address".**

**Please call me if there is any confusion about this. Thank you.**



(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.)

**Lindsay Scherr**

(Typed or printed name of person signing)

**President**

(Title of person signing)

**Filing Fee: \$35.00**

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TALLAHASSEE, FLORIDA