P10000014324

| (Re | equestor's Name) | |
|---|--------------------|-----------|
| (Address) | | |
| (Address) | | |
| (City/State/Zip/Phone #) | | |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | isiness Entity Nam | ne) |
| (Document Number) | | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to Filing Officer: | | |
| | | |
| | | |
| | | |
| | | |

Office Use Only



700185472197

700185472197 09/22/10--01011--009 **35.00

SECRETARY OF STATE
TAULAHASSEE, FLORIDA

Att Correction (a) 9/20/10

COVER LETTER

| TO: Amendment Section Division of Corporations | |
|---|--|
| SUBJECT: Custom Log | Name of Corporation |
| DOCUMENT NUMBER: PIOC | 2000 74324 |
| The enclosed Articles of Correction and i | fee are submitted for filing. |
| Please return all correspondence concern | ing this matter to the following: |
| Robert Coddin | i G |
| Firm/Company | |
| 206 Heavenly | 5+ |
| merrit Island, City/State and Zip Code | FL 32953 |
| Cid boat po C E-mail address: (to be used for future annual | report notification) |
| For further information concerning this m | natter, please call: |
| Christopher Davis C | PHat (321) 452-506/ 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: 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 |
| for LOQ St. C. State Name of Corporation a currently filed with the Florida Dept. of State |
| Name of Corporation as currently filed with the Florida Dept. of State 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 |
| filed with the Department of State on (File Date of Document) |
| Specify the inaccuracy, incorrect statement, or defect: |
| Ethochive Oate of the corporation |
| should be 4/10/10, was I led |
| to be ettective. 1011110 |
| |
| |
| AND |
| Correct the inaccuracy, incorrect statement, or defect: |
| |
| Ettertive date of corporation |
| shall be. |
| September 10, 2010 |
| |
| |
| (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.) |
| Sarah R Coddiny Director (Title of person signing) |

Filing Fee: \$35.00