

P10000087294

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TO: Amendment Section
Division of Corporations

SUBJECT: FLORIDA SHIELD INSURANCE. CORP.

Name of Corporation

DOCUMENT NUMBER: P10000087294

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

Please return all correspondence concerning this matter to the following:

Antonio E. Palao

Name of Contact Person

FLORIDA SHIELD INSURANCE. CORP.

Firm/Company

13540 NW 5th Ct.

Address

Plantation, FL 33325

City/State and Zip Code

palaot@bellsouth.net

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

For further information concerning this matter, please call:

Antonio E. Palao

Name of Contact Person

at (954) 850-1631

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

FLORIDA SHIELD INSURANCE. CORP.

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

P10000087294

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 10/25/2010.
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

FLORIDA SHIELD INSURANCE. CORP.

Correct the inaccuracy, incorrect statement, or defect:

FLORIDA SHIELD INSURANCE. CORP.



(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.)

Antonio E. Palao

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35.00

SECRETARY OF STATE
1611 ADAMS BLVD
TALLAHASSEE, FL 32304

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ARTICLES
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