

P11000014569

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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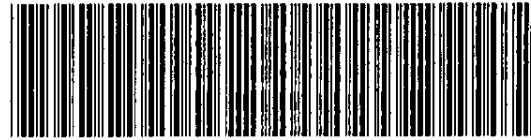
(Business Entity Name)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ORALUZ, Corp.

Name of Corporation

DOCUMENT NUMBER: P11000014569

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

Please return all correspondence concerning this matter to the following:

MARIA V. TORRES

Name of Contact Person

TAXPLUS FINANCIAL, Corp.

Firm/Company

9703 S DIXIE HWY SUITE 101

Address

MIAMI FL, 33156

City/State and Zip Code

taxlusfinancial@att.net

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

For further information concerning this matter, please call:

MARIA V. TORRES

Name of Contact Person

at (305) 798-7012

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

ORALUZ

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

P11000014569

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 Article I (The Name of Corporation)
(Document Type Being Corrected)

filed with the Department of State on February 10, 2011
(File Date of Document)


Specify the inaccuracy, incorrect statement, or defect:

The name i of corporation ~~OAZUL, CORP.~~ is wrong.

ORALUZ, LORP.

Correct the inaccuracy, incorrect statement, or defect:

The correct name is ORAZUL, 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.)

LUZ A. ROJAS

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35.00

APPROVED
AND
FILED
11 FEB 18 PM 3:58
SECRETARY OF STATE
TALLAHASSEE, FLORIDA