

P11000023060

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SECRETARY OF STATE
TALLAHASSEE, FL 32309

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AC
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LGB ESTATES CORP

Name of Corporation

DOCUMENT NUMBER: P11000023060

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

Please return all correspondence concerning this matter to the following:

MONIQUE TRONCONE CPA

Name of Contact Person

MONIQUE TRONCONE CPA PA

Firm/Company

55 NE 5TH AVENUE SUITE 501

Address

BOCA RATON, FL 33432

City/State and Zip Code

monique@troncone-cpa.com

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

For further information concerning this matter, please call:

MONIQUE TRONCONE

Name of Contact Person

at (561) 417-0308

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

LGB ESTATES CORP

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

P11000023060

Document Number (if known)

APPROVED
AND
FILED
11 MAR 16 PM 12:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 NAME OF DIRECTOR / SPELLED INCORRECT,
(Document Type Being Corrected)

filed with the Department of State on 03/07/2011.
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

IT SAYS : GARICA BOIDI, LUIS A SR

Correct the inaccuracy, incorrect statement, or defect:

THE CORRECT NAME : GARCIA BOIDI, LUIS A SR

(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)

LUIS GARCIA BOIDI

(Typed or printed name of person signing)

DIRECTOR

(Title of person signing)

Filing Fee: \$35.00