

PI1000035679

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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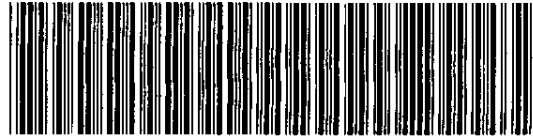
(Business Entity Name)

(Document Number)

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*Articles of
Correction*

04/20/11--01012--004 **43.75

FILED
2011 APR 20 PM 5:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DR
4/20/11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: HOTEL POSADA RESTAURANT DA DOMENICO CA, INC
Name of Corporation

DOCUMENT NUMBER: P11000035679

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

Please return all correspondence concerning this matter to the following:

IRVIN GIRON

Name of Contact Person

MY CITY REALTY INC

Firm/Company

1112 WESTON Rd. #282,

Address

WESTON FL 33326

City/State and Zip Code

GIRON.IRVIN@GMAIL.COM

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

For further information concerning this matter, please call:

IRVIN GIRON

Name of Contact Person

at (954) 294-6083

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

FILED

for

2011 APR 20 PM 5:00

HOTEL POSADA RESTAURANT DA DOMENICO CA, INC.

Name of Corporation as currently filed with the Florida Dept. of State
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P11000035679

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 04/12/2011
(File Date of Document)

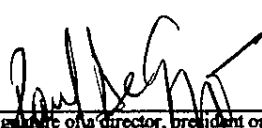
Specify the inaccuracy, incorrect statement, or defect:

NAME OF PRESIDENT SHOULD BE RAUL DE GREGORIO

NOT RAUL DI GREGORIO

Correct the inaccuracy, incorrect statement, or defect:

NAME OF PRESIDENT SHOULD BE RAUL DE GREGORIO


(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.)

RAUL DE GREGORIO

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35.00