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EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations	,
SUBJECT: MIKEF	Name of Corporation RIA LAWYER, P/
DOCUMENT NUMBER:	,
The enclosed Articles of Correction and for	ee are submitted for filing.
Please return all correspondence concernia	ng this matter to the following:
Name of Contact Person	
Mike Fink TRI	ALLAWYERS, P.A.
1614 Colonia	-(PS/V &
FOR MICHAEL CODE	S, FloriDA 33907
E-mail address: (to be used for future sunual re	FINKTRIAL LAWYERS. (FIN
For further information concerning this management of Contact Person	atter, please call: at (239) 826 - 90 / 0 Area Code & Daytime Telephone Number
Enclosed is a check for the following amo	unt:
\$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	Street Address:

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF CORRECTION

for
MIKEFINKTRIACLAYYYER, P. A., Name of Corporation as currently filed with the Florida Dept. of State, A.,
P1000053562 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 HVIC/ES OT LNCOV PO Tation, N
filed with the Department of State on OCO/08/20//.
Specify the inaccuracy, incorrect statement, or defect:
LAWYER NEEDS to DE PLURAL E
1 V C //
Add AN
AND Address should be
1614 COLONIAC Bluk
Fort allers, FC 35707
Correct the inaccuracy, incorrect statement, or defect:
MIKE FINKTRIAL LAWYERS, P.A.
1614 Colonial Bonlevard
Fort wyers, Francour 33907
(Signature of a director, president or other office) - 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.)
Michael G. E. W. Dress (Typed or printed name of person signing) (Title of person signing)

Filing Fee: \$35.00