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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Drellana Con DOCUMENT NUMBER: PILODO	ame of Corporation C63886	
The enclosed Articles of Correction and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following: Declara Name of Contact Person One of Contact		
Cosar Tires Plus Corp. Firm/Company		
4736 NW 167 Street		
Miami, FL 33015 City/State and Zip Code		
Dorellana a rocket Mail. Com E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
David Onlana Name of Contact Person	-	
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

ARTICLES OF CORRECTION
ARTICLES OF CORRECTION for Corp. Name of Corporation as currently filed with the Florida Dept. of State
PII 0000 63 880 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 a For - Profit Corporation, (Document Type Being Corrected)
filed with the Department of State on
Specify the inaccuracy, incorrect statement, or defect: The corporate name Orallana Group Corp. was
The corporate name Orellana Group Corp. was created by mistake.
Correct the inaccuracy, incorrect statement, or defect: Thoread of the actual name Orellana Group
would like to replace the current name
(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.) Auvid Dayllana Testident
(Typed or printed name of person signing) (Title of person signing)

Filing Fee: \$35.00