P11000067059

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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: MB Lobster Com	npany, Inc.	
DOCUMENT NUMBER: P11000067	•	
The enclosed Articles of Correction and fe	e are submitted for filing.	
Please return all correspondence concernir	ig this matter to the following:	
Michael E. Schnurbusc	h	
MB Lobster Company,	Inc.	
650 Azalea Avenue		
Merritt Island, FL 32952 City/State and Zip Code		
mbseafoodinc@aol.com E-mail address (to be used for future annual report notification)		
For further information concerning this matter, please call:		
_	at (321)459-1998	
Name of Contact Person	Area Code & Daytune Telephone Number	
Enclosed is a check for the following amor	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 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

MB Lobster Company, Inc.		
Name of Corporation as currently filed with the Florida De	ept, of State	
P11000067059 Document Number (if known)		
These articles of correction correct Articles of Amendmen	t	
tracument type	e Being Corrected)	
filed with the Department of State on 5/25/2017	·	
(File Date of Document)		
Specify the inaccuracy, incorrect statement, or defect:		
Kenneth Brown filed an unauthorized amendmen	nt falsely stating that he is	
the CPCEO.	· •	
THE OF OLO.		
Correct the inaccuracy, incorrect statement, or defect:		
Michael E. Schnurbusch is the President, Owner	Director	
Thioriad E. Commandacin to the Fredherit, Owner	, 57, 60, 60	
	54	
(Signature of a director, president or other officer - if directors not been selected, by an incorporator - if in the hands of the roother court appointed fiduciary, by that fiduciary.)	or officers have exceiver, trustee, or	
	D FI	
Michael E. Schnurbusch	President Over Director	
(Typed or printed name of person signing)	(Infect person signing)	
	*5 -4 °	

Filing Fee: \$35.00