

P11000108155

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Correction

TBrawn

1-6-12

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CONSOLIDATED FUNDING, INC.

Name of Corporation

**DOCUMENT NUMBER:** P11000108155

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

Please return all correspondence concerning this matter to the following:

MARTIN ALMAN

Name of Contact Person

ALMAN ACCOUNTING & TAX SERVICE

Firm/Company

17290 NE 19TH AVENUE

Address

NORTH MIAMI BEACH FL 33162

City/State and Zip Code

ALMANTAX@EARTHLINK.NET

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

For further information concerning this matter, please call:

MARTIN ALMAN

Name of Contact Person

at ( 305 ) 944-5353

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

**CONSOLIDATED FUNDING, INC.**

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

**P11000108155**

Document Number (if known)

**FILED**  
2011 DEC 30 AM 8:51  
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 **ARTICLES OF INCORPORATION**  
(Document Type Being Corrected)

filed with the Department of State on **DECEMBER 27, 2011**  
(File Date of Document)

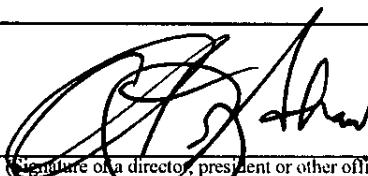
Specify the inaccuracy, incorrect statement, or defect:

**ERROR IN LISTING OFFICERS OF CORPORATION**

Correct the inaccuracy, incorrect statement, or defect:

**JAYE P. SHAW      PRESIDENT & SECRETARY**

**KENNETH P. SHAW      VICE-PRESIDENT & TREASURER**



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.)

**KENNETH P. SHAW**  
(Typed or printed name of person signing)

**V.P.**

(Title of person signing)

**Filing Fee: \$35.00**