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Correction
TBrown 1-24-12

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: HALLA NDALE	SERVICE STATION INC
DOCUMENT NUMBER: 7120	00003359
The enclosed Articles of Correction and fee	are submitted for filing.
Please return all correspondence concerning	this matter to the following:
RUDOLF STOK	2MAM
-HALLANDALE SERI	IICE STATION INC
3180 HALLANDAL	E BEACH BLUD
HALLANDALE BE	EACH FL-33009
E-mail address: (to be used for future annual rep	, Coin
For further information concerning this mat	ter, please call:
RUDOLF STOKMANS Name of Contact Person	at (954) 242-6800 Area Code & Daytime Telephone Number
Enclosed is a check for the following amou	nt:
₩\$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
-HALLANDALE SERVICE STATION INC
Name of Corporation as currently filed with the Florida Dept. of State
T12000003359
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)
,
(File Date of Document)
Specify the inaccuracy, incorrect statement, or defect:
Specify the inaccuracy, incorrect statement, or defect: President and Registered Agent STOKMANS
70 7
The second secon

Correct the inaccuracy, incorrect statement, or defect:
Please Change Prosident and Registered Agent
STOKMANS, KUDOLF
<u> </u>
(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.)
KUDOLF STOKMANS PRESIDENT (Typed or printed name of person signing) (Title of person signing)

Filing Fee: \$35.00