P12000/3862

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Articles of Con

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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Allegiant DOCUMENT NUMBER: P12	Auto transport
DOCUMENT NUMBER: P12	000013862
The enclosed Articles of Correction and fe	
Please return all correspondence concerning	ng this matter to the following:
JCFF Kupupert Name of Confact Person	·
Allegiant Auto	transport
2713 Nw 53	2nd St
Fort Laudendo City/State and Zip Code	VE FL 33309
Jeffellegiante E-mail address: (to be used for future annual re	2) Condiction port notification
For further information concerning this ma	atter, please call:
JEFF Rup good	Tat (561) 674-780 L Area Code & Daytime Telephone Number
Enclosed is a check for the following amou	ınt:
\$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

Allegiant Auto transport Inc. Name of Corporation as currently filed with the Florida Dept. of State
Allegiant Auto transport Inc. Name of Corporation as currently filed with the Florida Dept. of State P12000013862 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 Tricor para tion, (Document Type Being Corrected)
filed with the Department of State on
Specify the inaccuracy, incorrect statement, or defect:
Effective date is 04/13/2012
Correct the inaccuracy, incorrect statement, or defect:
We need it corrected
to have the
EFFECTIVE COURS BY 05/14/13
<u> </u>
(Signature of a director, president of 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 mat fiduciary.)
Jeff Rapadout (Typed or printed name of person signing) (Title of person signing)

Filing Fee: \$35.00