

FEB 16 2012 11:31AM

CAPITAL CONNECTION

NO. 9054

P. 1
Page 1 of 1

P12000014741

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : YOUR CAPITAL CONNECTION, INC.
Account Number : I20000000257
Phone : (850) 224-8870
Fax Number : (850) 222-1222

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MOTO IMPULSE, INC.

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MOTO IMPULSE, INC.

Name of Corporation

DOCUMENT NUMBER: P12000014741

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

Please return all correspondence concerning this matter to the following:

JOHN N BOWMAN

Name of Contact Person

JOHN N BOWMAN CPA

Firm/Company

1636 FIRST AVENUE NORTH

Address

ST PETERSBURG, FL 33713

City/State and Zip Code

john.bowman@jnb-cpa.com

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

For further information concerning this matter, please call:

JOHN N BOWMAN

Name of Contact Person

at (727) 823-1332

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

FEB. 16. 2012 11:31AM

CAPITAL CONNECTION

NO. 9054 P. 3

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ARTICLES OF CORRECTION

for

MOTO IMPULSE, INC.

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

P12000014741

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)

filed with the Department of State on **FEBRUARY 10, 2012**

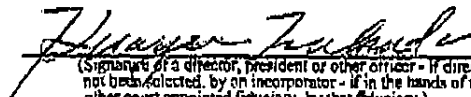
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

**THE NAME OF THE PRESIDENT, TREASURER, SECRETARY, DIRECTOR AND
REGISTERED AGENT WAS INACCURATELY SPELLED AS: HISAYA HAKADA.**

Correct the inaccuracy, incorrect statement, or defect:

**THE CORRECT SPELLING OF THE PRESIDENT, TREASURER, SECRETARY,
DIRECTOR AND REGISTERED AGENT IS: HISAYA NAKADA.**


(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.)

HISAYA NAKADA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35.00