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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

SUBJECT: KAVEN FALCONET P.A. DOCUMENT NUMBER: P120002 348 The enclosed Articles of Correction and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **KAVEN FALCONET** Name of Contact Person **KAVEN FALCONET** Name of Contact Person **KAYEN FALCONET** **Company **DOCUMENT NUMBER: P120002 348 **Contact Person **KAYEN FALCONET** **PARTITION TO THE TRANSPORT OF THE TRAN	TO: Amendment Section Division of Corporations		
The enclosed Articles of Correction and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **Harm Falconer** Name of Contact Person **Karen Falconer** Name of Contact Person **Land Care PA **Firm/Company **Democratical Entitle Address** **City/State and Zip Code **Kafalconer** **Sall 3 22 **City/State and Zip Code **Kafalconer** **Code & Daylime Telephone Number** **Falconer** Name of Contact Person **Tate Code & Daylime Telephone Number** **Enclosed is a check for the following amount: **Sall 3.75 Filing Fee	SUBJECT: Kaven Fa	Jones P.A. me of Corporation	
Please return all correspondence concerning this matter to the following: Karen Falconer Name of Contact Person Karen Falconer Name of Contact Person Cr Address Car Chy/State and Zip Code Kafalconer 3 @ Comcast nut E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Karen Falconer Name of Contact Person at (QU) Area Code & Daytime Telephone Number Enclosed is a check for the following amount: \$35.00 Filling Fee \$43.75 Filling Fee & Certificate of Status & Certified Copy Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Cr Cr Cr Cr Address: Amendment Section Division of Corporations Division of Corporations Clifton Building 2661 Executive Center Circle	DOCUMENT NUMBER: P12	000027348	
Haven Falconer Name of Contact Person Karen Falconer Address Sar word Name of Contact Person Ciry/State and Zip Code Kafalconer 3 o Comcast nut E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Haven Falconer Name of Contact Person at (Au) Area Code & Daytime Telephone Number Enclosed is a check for the following amount: \$35.00 Filling Fee \$43.75 Filling Fee & Certificate of Status & Certificate Copy Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Ciffon Building 2661 Executive Center Circle	The enclosed Articles of Correction and fee are submitted for filing.		
Karen Falconer PA Firm/Company 5776 Whistleward Cir Sarabo N. 34232 City/State and Zip Code Kafalconer 3 o. Comcast rolf E-mail address. (to be used for future annual report notification) For further information concerning this matter, please call: When Falconer at (All 373301) Area Code & Daytime Telephone Number Enclosed is a check for the following amount: \$35.00 Filing Fee \$\Bigcircle{\text{S43.75 Filing Fee}} & Certificate of Status & Certified Copy \$43.75 Filing Fee, Certificate of Status & Certified Copy Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 2661 Executive Center Circle	Please return all correspondence concerning	this matter to the following:	
Saraba Mailing Address: Address: Address: Address: Address: Amendment Section Division of Corporations P. Com Cast Inst. E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Area Code & Daytime Telephone Number Status Street Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 City/State and Zip Code Annual report notification) At (Author Status) Area Code & Daytime Telephone Number Status Area Code & Daytime Telephone Number Street Address: Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Karen Falconer Name of Contact Person		
Enclosed is a check for the following amount: \$\begin{align*} \text{State and Zip Code} \\ \text{Loner 3 0. Com Cost. rult} \\ \text{E-mail address: (to be used for future annual report notification)} \\ \text{For further information concerning this matter, please call:} \\ \text{Loner Follower} \\ \text{Name of Contact Person} \\ \text{at (\text{QUI)} \text{378-3804} \\ \text{Area Code & Daytime Telephone Number} \\ \text{S35.00 Filing Fee} \text{S43.75 Filing Fee & Certificate of Status & Certified Copy} \\ \text{\text{Mailing Address:}} \\ \text{Amendment Section} \\ \text{Division of Corporations} \\ \text{Po. Box 6327} \\ \text{Tallahassee, FL 32314} \\ \text{2661 Executive Center Circle} \end{area}	Karen Falconer PA		
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Enclosed is a check for the following amount: \$\sqrt{\$35.00\ \text{Filing Fee}}\$ = \$\sqrt{\$43.75\ \text{Filing Fee}}\$ & Certificate of Status \$\sqrt{\$\sqrt{\$43.75\ \text{Filing Fee}}\$ & Certified Copy}\$ = \$\sqrt{\$\sqrt{\$52.50\ \text{Filing Fee}}\$ & Certificate of Status & Certified Copy}\$ \$\sqrt{\$\sqrt{\$\sqrt{\$Mailing Address:}}\$ & \sqrt{\$\sqrt{\$\sqrt{\$mendment Section}}\$ & \text{Amendment Section}\$ & \text{Division of Corporations}\$ & \text{Division of Corporations}\$ & \text{Division of Corporations}\$ & \text{Clifton Building}\$ & \text{Tallahassee, FL 32314}\$	For further information concerning this matter, please call:		
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Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Certified Copy Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	· ·		
Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	\$43.75 Filing Fee & Certified Copy	S52.50 Filing Fee, Certificate of Status & Certified Copy	
•	Amendment Section Division of Corporations P.O. Box 6327	Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle	

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ARTICLES OF CORRECTION

TALLAHASSEE STATE

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

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 3-19-2012

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

Name Should End with a P.A. for

Year Island agents

Correct the inaccuracy, incorrect statement, or defect:

Please Change Corp name to:

(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.)

fall oner

Karen Falconer
(Typed or printed name of person signing)

President
(Title of person signing)

Filing Fee: \$35.00