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## **COVER LETTER** .

Amendment Section

**Division of Corporations** SUBJECT: HEMACA INC DOCUMENT NUMBER: P12000046434 The enclosed Articles of Correction and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **HENRY CAMINO SR** Name of Contact Person **HEMACA INC** Firm/Company 8633 NW 114 COURT Address DORAL, FLORIDA, 33178 City/State and Zip Code furrial@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Henry Camino Sr Name of Contact Person 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: Street Address:** Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF CORRECTION

for

HEMACA INC	
Name of Corporation as currently filed with the Florida Dept. of State	_
P12000046434 Document Number (if known)	
Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, these Articles of Correction within 30 days of the file date of the document be	this corporation files eing corrected.
These articles of correction correct ARTICLES OF INCORPORATION, (Document Type Being Corrected)	ARTICLE VII,
filed with the Department of State on MAY 18 2012  (File Date of Document)	
Specify the inaccuracy, incorrect statement, or defect:	پېښونو
ARTICLES OF INCORPORATION, ARTICLE VII, TITLE: VP	
FLORES FLORES (INCORRECT)	12 H
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A	<u> </u>
Correct the inaccuracy, incorrect statement, or defect:	
ARTICLE OF INCORPORATION, ARTICLE VII, TITLE: VP	
**************************************	
MARIANA FLORES	
(Signature of a director, president or other officer - if directors or officers have not been salected by an incorporator - if in the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	·
HENRY CAMINO	P
(Typed or printed name of person signing)	(Title of person signing)

Filing Fee: \$35.00