

P12000057787

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Art. of Correction

07-23-12

DL

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** PRIVETTE, INC.

Name of Corporation

**DOCUMENT NUMBER:** P12000057787

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

Please return all correspondence concerning this matter to the following:

**BRIAN PRIVETTE**

Name of Contact Person

Firm/Company

**PO BOX 10220**

Address

**NAPLES FL 34101**

City/State and Zip Code

**PRIVETTEPLUMBING@YAHOO.COM**

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

For further information concerning this matter, please call:

**GARY WITTOCK CPA**

Name of Contact Person

at ( **239** ) **434-5818**

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

**ARTICLES OF CORRECTION**

for

**PRIVETTE, INC.**

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

**P12000057787**

Document Number (if known)

FILED  
12 JUL 16 AM 9:03  
SECRETARY OF STATE  
TALLAHASSEE FL 32399

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 **06/27/2012**

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

**SPELLING ERROR IN ADDRESS INFORMATION**

**CRONTON RD SHOULD BE CROTON RD**

Correct the inaccuracy, incorrect statement, or defect:

**PRINCIPAL ADDRESS: 3530 CROTON RD, NAPLES, FL 34104**

**MAILING ADDRESS: PO BOX 10220, NAPLES, FL 34101**

**REGISTERED AGENT ADDRESS: 3530 CROTON RD, NAPLES, FL 34104**



(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.)

**BRIAN PRIVETTE**

(Typed or printed name of person signing)

**DPST**

(Title of person signing)

**Filing Fee: \$35.00**