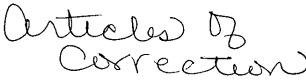
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2012 JUL 27 AM IO: 43
SECRE (ARY OF STATE
NATIONAL SEE FLORIDA

1/27/12

COVER LETTER

TO: Amendment Section Division of Corporations					
SUBJECT: HORACE ME	T AND FISH INC				
DOCUMENT NUMBER: \$120000 58434					
The enclosed Articles of Correction and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
ALBERTO TUGO Name of Contact Person					
TUGO AND COM	PANY				
10900 NW 25TH STR	KET STE 102				
DORM PL 33	3172				
City/State and Zip Code					
ATRI60 e BRISS	して4. やで 下				
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Name of Contact Person	at (305) 443-428 5 Area Code & Daytime Telephone Number				
Enclosed is a check for the following amou	nt:				
\$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	2012 JUL 2 1	AM 10: 43
	HULLALE Name of Corporal	MEAT AND A	S LA IN FALLAHASSEE	OF STATE Eflorida
	Ρ	Document Number (if known)	4	
Pursuant to the provis these Articles of Corr	sions of Section 6 ection within 30 c	07.0124 or 617.0124, Flor lays of the file date of the	rida Statutes, this corporation document being corrected	on files
These articles of corre	ection correct	ARTILLES OF IN (Document Ty	conforATION pe Being Corrected)	_,
filed with the Departm	nent of State on _	July 2 (File Date of Documer	2012	
Specify the inaccurac	y, incorrect stater	nent, or defect:		
AMARA	POJAS 1	PRESIDENT		
	···········			
Correct the inaccurac	v. incorrect staten	nent, or defect:		
ARELY	ROJAS	PRESIDENT		
war and the state of the state	,		and the second s	
				
	not been selected, by	or, prefident or other officer - if directo an incorporator - if in the hands of the I fiduciary, by that fiduciary.)	rs or officers have receiver, trustee, or	
AMARA	Q o TAR		Sezretary	
	inted name of nerson sign	ng)	(Title of person sign	ing)

Filing Fee: \$35.00