

P120000078399

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

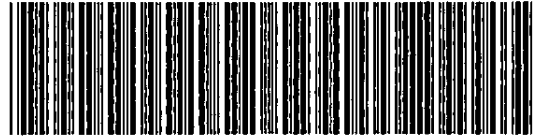
(Business Entity Name)

(Document Number)

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FILED STATE  
SECRETARY OF CORPORATION  
DIVISION OF CORPORATION  
13 APR -8 PM 3:50

And Correction  
@ 4.9.13

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Camarillo Investments Inc.

Name of Corporation

DOCUMENT NUMBER: P12000078399

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

Please return all correspondence concerning this matter to the following:

Autumn Walker

Name of Contact Person

Camarillo Investments Inc

Firm/Company

47 North Krome Avenue

Address

Homestead, Florida 33030

City/State and Zip Code

GGayoso@skynet360.com

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

For further information concerning this matter, please call:

Autumn Walker

Name of Contact Person

at ( 786 ) 581-5555

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 27, 2013

AUTUMN WALKER  
CAMARILLO INVESTMENTS INC  
47 NORTH KROME AVENUE  
HOMESTEAD, FL 33030

SUBJECT: CAMARILLO INVESTMENTS INC  
Ref. Number: P12000078399

We have received your document for CAMARILLO INVESTMENTS INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

The document must have original signatures.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 513A00007181

RECEIVED  
13 MAR -8 AM 11:21  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**ARTICLES OF CORRECTION**

For

**Camarillo Investments Inc**

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

**P12000078399**

Document Number (if known)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
13 APR -8 PM 3:50

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 **2013 Annual Report**  
(Document Type Being Corrected)

filed with the Department of State on **February 6, 2013**  
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

**Current Principle Place of Business: 47 North Homestead, FI 33030**

**Current Mailing Address: 47 North Homestead, FI 33030 US**

**Address of Current Registered Agent: 47 North Homestead, FI 33030**

**Officer/Director Jose Camarillo Address: 47 North Homestead, FI 33030**

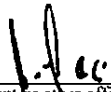
Correct the inaccuracy, incorrect statement, or defect:

**Current Principle Place of Business: 47 North Krome Avenue Homestead, FI 33030**

**Current Mailing Address: 47 North Krome Avenue Homestead, FI 33030 US**

**Address of Current Registered Agent: 47 North Krome Avenue Homestead, FI 33030**

**Officer/Director Jose Camarillo Address: 47 North Krome Avenue Homestead, FI 33030**

  
(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.)

**Jose Camarillo**  
(Typed or printed name of person signing)

**MGRM**  
(Title of person signing)

**Filing Fee: \$35.00**