

P120000092299

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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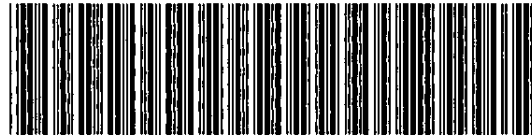
(Business Entity Name)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 NOV 30 PM 3:00

First Correction  
10 11/30/12

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: **LOLALOLA INC**

Name of Corporation

DOCUMENT NUMBER: **P12000092299**

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

Please return all correspondence concerning this matter to the following:

**BRIAN DEL FIERRO**

Name of Contact Person

**BALWANT CHEEMA CPA**

Firm/Company

**8301 NW 197TH STREET**

Address

**MIAMI, FL 33015**

City/State and Zip Code

**BRIAN@BALCPA.COM**

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

For further information concerning this matter, please call:

**BRIAN DEL FIERRO** at **(305) 764-1073**

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> \$35.00 Filing Fee       | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status                 |
| <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$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

**LOLALOLA INC**

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

**P12000092299**

Document Number (if known)

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 **ARTICLE VII**

(Document Type Being Corrected)

filed with the Department of State on **11/05/12**

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

**INCORRECT SPELLING OF PTS - GIAN PAOLO TORDI**

Correct the inaccuracy, incorrect statement, or defect:

**CORRECT PTS TO - GIOVAN PAOLO TORDI**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 NOV 30 PM 3:00

(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.)

**GIOVAN PAOLO TORDI**

(Typed or printed name of person signing)

**PRESIDENT**

(Title of person signing)

**Filing Fee: \$35.00**