P12000099031

(Requestor's Name) (Address) (Address)	600242537126	
(City/State/Zip/Phone #)	12/11/1201014005 **35.00	
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	BIVISION OF CORPORATIONS	
Office Use Only	ALCOrrection Manuchs 12/12/12	

COVER LETTER

Amendment Section Division of Corporations

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TO:

SUBJECT: Battery Minders Inc

Name of Corporation

DOCUMENT NUMBER: P12000099031

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

Please return all correspondence concerning this matter to the following:

Linda Newton

Name of Contact Person

Mary Fox Tax & Accounting

Firm/Company

10941 SE US Hwy 441

Belleview, FL 34420

City/State and Zip Code

Linda@tax-helper.com

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

For further information concerning this matter, please call:

Linda Newton

Name of Contact Person

352 347-4424 Area Code & Daytime Telephone Number

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□ \$52.50 Filing Fee, Certificate of Status &

Enclosed is a check for the following amount:

S35.00 Filing Fee

\$43.75 Filing Fee & Certificate of Status

Certified Copy

□ \$43.75 Filing Fee & Certified Copy

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

			
12/05/2012	11:09DIS Phoenix Az.	(FAX)8555248853	P.001/001
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<i>i</i>	ARTICLES OF CORRECTION	rİ	
	For		
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	Name of Corporation as currently filed with the Planda Dept. of S		5.
	P12000099031		A. TOTO
	Document Number (If known)		AC ONTRACT
r	Pursuant to the provisions of Section 607.0124 or 617.0124, Florida St these Articles of Correction within 30 days of the file date of the docum	atutes, this corporation files	D D D S
	These Articles of Correction within 30 days of the file date of the docum	nent being corrected.	THE STATE
	These articles of correction correct Articles of Incorporation	Constat)	12 DEC 11 BR D. BU
	filed with the Department of State on 12/04/12 (File Della of Document)		
;	Specify the inaccuracy, incorrect statement, or defect:		
•	Name of corporation should be all one word:		_
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	BatteryMinders Inc.		
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		resident	_
	(Typed or printed name of person signing)	(Title of person signing)	
	Filing Fee: \$35.00		
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