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SECRETARY OF STATE

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... • COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: $Arteggg$ \mathcal{E} DOCUMENT NUMBER: $P/30$	Artegga P.A.	
The enclosed Articles of Correction and fee are submitted for filing.		
Please return all correspondence concerning		
Javier Artenga Name of Contact From		
Arteaga & Arteag	9 P.A.	
100 N. Biscayne Br	Vd., STE 2100	
Minusi Florida City/State and Zip Code	33/32	
Arteggs. Law @ gone Email address: (to be used for future annual re	eport notification)	
For further information concerning this ma	atter, please call:	
Javier Artenga Name of Contact Person	at (305) 9045034 Area Code & Daytime Telephone Number	
Enclosed is a check for the following amo	unt:	
\$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 Decorporations P.O. Box 5527 Tallahassee FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF CORRECTION $_{13}$ $_{13}$
For SECRETARY OF STATE Name of Corporation as currently files with the Florida Dept. of State P1300002257 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 Electronic Articles of Incorporation, (Document Type Being Corrected)
Specify the inaccuracy, incorrect statement, or defect: Tanya R. Artega Shald not be listed as vice president. Please delete her From the Articles of Incorporation.
Correct the inaccuracy, incorrect statement, or defect: The only officer will be Javier Artega as Resident. There are no other officers.
as President. There are no other officers.
(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, trusice, or other court appointed fiduciary, by that fiduciary.) The sident of the receiver, trusice, or other court appointed fiduciary, by that fiduciary.) (Typed or printed name of person signing)

Filing Fee: \$35.00