

P130000051685

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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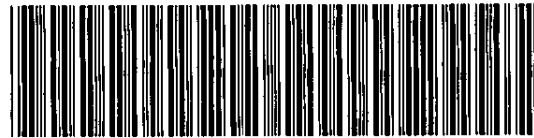
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Art Correction
@ 7/3/13

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BURKES FUNERAL ESCORT SERVICES, INC
Name of Corporation

DOCUMENT NUMBER: P13000051685

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

Please return all correspondence concerning this matter to the following:

WAYNE COX
Name of Contact Person

Firm/Company

16200 N.W. 34TH PLACE
Address

MIAMI GARDENS, FL 33054
City/State and Zip Code

WECOXSR @ YAHOO . COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WAYNE COX at (305) 305-4601
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | |
|--|---|
| <input 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

BURKES FUNERAL ESCORT SERVICES, INC

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

P13CCCC51685

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 ARTICLES OF INCORPORATION
(Document Type Being Corrected)

filed with the Department of State on JUNE 14, 2013
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

ON APPLICATION: WAYNE COX SR. PRESIDENT

Correct the inaccuracy, incorrect statement, or defect:

WAYNE COX SR. DIRECTOR

Wayne Cox

(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.)

WAYNE COX SR

(Typed or printed name of person signing)

Director

(Title of person signing)

Filing Fee: \$35.00

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TALLAHASSEE FLORIDA