P13000080943

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COVER LETTER

TO: Amendment Section Division of Corporations	·	
SUBJECT: RICONCITO F	RUSO, INC	
DOCUMENT NUMBER: P13000	1	
The enclosed Articles of Correction ar	nd fee are submitted for filing.	
Please return all correspondence conce	•	
Aliaksandr Kir		
Name of Contact Person		
Firm/Company	·	
455 Golden Isles Dr.	#309	
Address		
Hallandale FL 33009		
City/State and Zip Co	de	
E-mail address: (to be used for future an		
e-man address, (to be used for inture and	naa report normeadon)	
For further information concerning thi	s matter, please call:	
Name of Contact Person	at () Area Code & Daytime Telephone Number	
Enclosed is a check for the following a	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	

ARTICLES OF CORRECTION

For

RICONCITO RUSO, INC Name of Corporation as currently filed with the Florida Dept. of State

P13000080943	
Document Number (if known)	
Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statute these Articles of Correction within 30 days of the file date of the document These articles of correction correct Electronic Articles of Incorporation Correction Cor	ation
filed with the Department of State on 10/02/2013 (File Date of Document)	_·
Specify the inaccuracy, incorrect statement, or defect:	
Corporation name is missing a letter	
Corporation name is missing a letter	
Correct the inequired incorrect statement, or defeats	
Correct the inaccuracy, incorrect statement, or defect:	
RINCONCITO RUSO, INC	
	<u> </u>
	<u> </u>
AP-	
(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, other court appointed fiduciary, by that fiduciary.)	
Aliaksandr Kipel	President
(Typed or printed name of person signing)	(Title of person signing)

Filing Fee: \$35.00