# P13000082914

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#### **COVER LETTER**

TO:	Amendment Section
	Division of Corporations

SUBJECT: HAMSPHIRE CORPORATIONS

Name of Corporation

DOCUMENT NUMBER: P13000082914

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

Please return all correspondence concerning this matter to the following:

ANA M. LEON

Name of Contact Person

Pirm/Company

6838 NW 77 CT

Address

MIAMI, FL 33166

Chy/State and Zip Code

AMARIALEON@BELLSOUTH.NET

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

For further information concerning this matter, please call:

CARMEN SOTOLONGO

at 305 235-6355

Name of Contact Person

Enclosed is a check for the following 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

# HAMSPHIRE CORPORATIONS

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

P1300082914	
Document Number (if known)	
Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statu these Articles of Correction within 30 days of the file date of the documer	t being corrected.
These articles of correction correct NAME OF THE CORPORATE (Document Type Being Corr	TON ,
	accs)
filed with the Department of State on OCTOBER 8, 2013  (File Date of Document)	•
(File Date of Document)	
Specify the inaccuracy, incorrect statement, or defect:	
NAME OF CORPORATION WAS INCORRECTLY TYPE	PED
TWINE OF CORR CHOTTON WAS INCOMED TO	
Section 1997 - Control 1997 - Contro	
The state of the s	
•	
Correct the inaccuracy, incorrect statement, or defect:	
• •	
HAMPSHIRE CORPORATION:	
- 0 (1 st (1	Art Mille and Marie Andreas and a second and a
* Ohalfaria Schelland Jeon	
(Signature of a director, president or other officer - if directors or officers he not been selected, by an incorporator if in the hands of the receiver, trust other court appointed fiduciary, by that fiduciary.)	uve De, or
other count appointed fiduciary, my that publicary.)	
/	
ANA M. LEON PR	ESIDENT
(Typed or printed name of person signing)	(Title of person signing)

Filing Fee: \$35.00