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Ant Correction

COVER LETTER

TO: Amendment Section Division of Corporations

La Hatillana Investments, I SUBJECT:		
DOCUMENT NUMBER: P130000848	Name of Corporation 321	
The enclosed Articles of Correction and for		
Please return all correspondence concerni	<u>-</u>	
•	ing this matter to the following.	
Carlos Aguilar		
Name of Contact Person		
Somerset Corporate Services, Inc.		
Firm/Company		
200 Crandon Blvd. Suite 360		
Address		
Miami, Florida 33149		
City/State and Zip Code		
caguilar@aguilarfirm.com		
E-mail address: (to be used for future annual	report notification)	
For further information concerning this m	•	
Maria A Rodriguez	305 377-2710	
Name of Contact Person	at () Area Code & Daytime Telephone Number	
Enclosed is a check for the following amo	ount:	
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D \$ 10.75 1 ming 1 to to comment copy	Certified Copy	
Mailing Address:	Street Address:	
Amendment Section	Amendment Section	
Division of Corporations P.O. Box 6327	Division of Corporations	
Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle	
randimoses, and and a r	Tallahassee, FL 32301	

ARTICLES OF CORRECTION

For

La Hatillana Inve	,	- John College
	Name of Corporation as currently filed with the Florid	da Dept. of State
	P13000084821	da Dept, of State
	Document Number (if known)	
ursuant to the provisionese Articles of Correc	ons of Section 607.0124 or 617.0124, For tion within 30 days of the file date of the file date of the file of the	he document being corrected.
hese articles of correc-	tion correct	Type Being Corrected)
iled with the Departme	ent of State on(File Date of Document	-
lnacify the inecouracy	incorrect statement, or defect:	ment)
	eads Auira D'Alfonso	
" -		
Correct the inaccuracy,	incorrect statement, or defect:	
	should read: Aura Leciñena de D'A	Alfonso
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	()) [()	
	(Signature of a director, president on other officer - if dire not been selected, by an incorporator - if in the hands of other court appointed fiduciary, by that fiduciary.)	retors or officers have the receiver, trustee, or
Carlos Aguilar/Some	erset Corporate Services, Ir	Incorporator
(Typed or print)	ed name of person signing)	(Title of person signing)

Filing Fee: \$35.00

(Time of person signing