

P140000000799

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DIVISION OF CORPORATIONS
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Art Correction
Name ch 8
@ 1.21.14

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CORRECT NAME OF CORP.

Name of Corporation

DOCUMENT NUMBER: P14000000799

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

Please return all correspondence concerning this matter to the following:

NURI DUCASSI

Name of Contact Person

Firm/Company

5118 HAYES ST

Address

HOLLYWOOD, FL 33021

City/State and Zip Code

nducassi@aol.com

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

For further information concerning this matter, please call:

NURI DUCASSI

Name of Contact Person

at ()

Area Code & Daytime Telephone Number

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

1.N.JODUCASSI MEDIA DESIGN INC.

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

P14000000799

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 NAME OF CORPORATION

(Document Type Being Corrected)

filed with the Department of State on JAN 3, 2014


(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

1.N.JODUCASSI MEDIA DESIGN INC.

Correct the inaccuracy, incorrect statement, or defect:

NJoDucassi Media Design Inc.


(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.)

NURI DUCASSI

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35.00

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