P14000019262

(Requestor's Name)		
(Address)	_	
(Address)	_	
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status	_	
Special Instructions to Filing Officer:		

Office Use Only



000257365130

03/07/14--01016--002 **35.00

TALLAN PASSES, FI ORIDA

14 MAR 7 PH 9: 34

ARt of Correction

MAR 11 2014'
T. CARTER

COVER LETTER

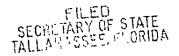
Division of Corporations				
SUBJECT: Allmake Incorpo				
DOCUMENT NUMBER: P14000019	ame of Corporation 1262			
The enclosed Articles of Correction and fe	e are submitted for filing.			
Please return all correspondence concerning	ng this matter to the following:			
Michael A. Silva				
Name of Contact Person				
Allmake Incorporated				
3120 W 68 PL				
Hialeah FL 33018				
City/State and Zip Code MICHAELSILVA7@COMCAST.NET E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Esmeralda Valdes	at (305) 505-5817			
Name of Contact Person	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	Street Address: Amendment Section Division of Corporations Clifton Building			

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF CORRECTION



For

14 MAR 7 PH 9: 34

Allmake Incorporated	
Name of Corporation as currently filed with the	Florida Dept. of State
P14000019262	
Document Number (if know	vn)
Pursuant to the provisions of Section 607.0124 or 617.012 these Articles of Correction within 30 days of the file date	4, Florida Statutes, this corporation files of the document being corrected.
These articles of correction correct Articles of Incorp	oration ument Type Being Corrected)
filed with the Department of State on 02/28/2014 (File Date of	
Specify the inaccuracy, incorrect statement, or defect:	
Incorrect: 3120 W 32 PL on all address	
Missing EIN	
Missing VP	
J	
Correct the inaccuracy, incorrect statement, or defect: correct: 3120 W 68 PL	
EIN 46-4978036	
VP-Igor KotlyAR 316	30 W/B P/ 32018
	1001, Pr. 00016
(Signature of a director, president or other officernot been selected, by an incorporator - if in the hat other court appointed fiduciary, by that fiduciary.	nds of the receiver, trustee, or
Michael A Silva	President
(Typed or printed name of person signing)	(Title of person signing)

Filing Fee: \$35.00