

P140000047141

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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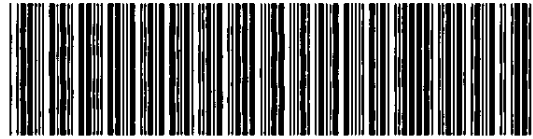
(Business Entity Name)

(Document Number)

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Art Correction
cc/aus
@ 6/27/14

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Hair by Rosamaria, Inc.
Name of Corporation

DOCUMENT NUMBER: P14000047141

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

Please return all correspondence concerning this matter to the following:

Rosamaria Aelotta
Name of Contact Person

Firm/Company

4747 Hollywood Boulevard
Address

Hollywood, Florida 33021
City/State and Zip Code

hairbyrosamaria@att.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rosamaria Aelotta at (954) 649-3261
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
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF CORRECTION

For

Hair by Rosamaria, Inc.

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

P14000047141

Document Number (if known)

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14 JUN 16 PM 1:02

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

the Articles of Incorporation

(Document Type Being Corrected)

filed with the Department of State on

5/28/2014

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

president Hair by Rosamaria, Inc

Correct the inaccuracy, incorrect statement, or defect:

president Rosamaria Arlotta

4747 HWD. BLVD
HWD FL 33021

Rosamaria Arlotta

(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.)

Rosamaria Arlotta

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35.00