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OIVISION OF CORPORATION

C. LEWIS

JUN 2 6 2014

EXAMMER

COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: MACIGUADA DISPEN	Sary of South Fhorida, Two.			
DOCUMENT NUMBER: P14 0000 49714				
The enclosed Articles of Correction and fee are submitted for filing.				
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Paula Mario Saccomana Name of Contact Person	<u>10</u>			
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5395 Grand PARK Place				
Boca Ratow, Florid	a 33486			
E-mail address: (to be used for future admual report notification)				
For further information concerning this matter, please call:				
TAULA MARIL SACCOMANNO at (56) 716.6806 Name of Contact Person Area Code & Daytime Telephone Number				
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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

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****	P 14 0000 497 14 Document Number (if known)	
hese Articles of Correction within	n 607.0124 or 617.0124, Florida Statu 30 days of the file date of the document	nt being corrected.
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	on Tune 5, 2014 (File Date of Document)	•
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11/111/1/20	ANH VIOLENSHILES DI GOU	in thought suc.
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(Signature of a d	ARCE JOCCOM AND DECEMBER OF THE PROPERTY OF TH	iave
	 d, by an incorporator - if in the hands of the receiver, trust inted fiduciary, by that fiduciary.) 	cc, or
D. 100 . C		<u> </u>
AND MARIE DACCOMA	AVA D	Viactor

Filing Fee: \$35.00