

P14000074245

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

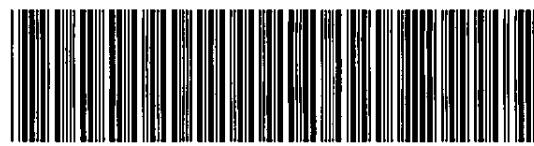
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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16 SEP 12 AM 11:31
FILED, SECRETARY OF STATE
DIVISION OF CORPORATIONS

Aut Correction
⑩ 9.19.14

COVER LETTER

TO: Amendment Section
Division of Corporations

**FILING CANCELLED
RETURNED CHECK**

SUBJECT: G Probangs
Name of Corporation

DOCUMENT NUMBER: P14000074245

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

Please return all correspondence concerning this matter to the following:

Timothy Jackson
Name of Contact Person

G Probangs
Firm/Company

4690 Lipscomb St Ste 5C NE
Address

Palm Bay FL 32905
City/State and Zip Code

pushprinting@Yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Timothy Jackson at (321) 591-1645
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

• **FILING CANCELLED ARTICLES OF CORRECTION
RETURNED CHECK**

For

6 probanga INC

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

P14000074245

Document Number (if known)

FILED
14 SEP 12 AM 11:31
FLORIDA SECRETARY OF STATE
DEPARTMENT OF CORPORATIONS

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 VII
(Document Type Being Corrected)

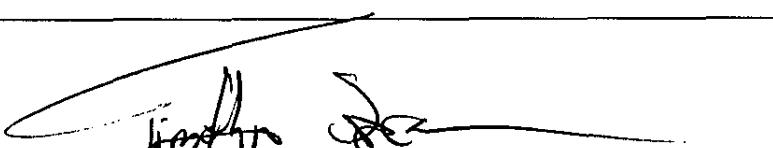
filed with the Department of State on Sept 8, 2014
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

The name of the officer was incorrect.

Correct the inaccuracy, incorrect statement, or defect:

Pittle: P
Gail Marshall
4695 Lipscomb st 3D NE
Palm Bay FL 32905


(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.)

Timothy Jackson
(Typed or printed name of person signing)

Incorporator
(Title of person signing)

Filing Fee: \$35.00