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(R	equestor's Name)			
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COVERLETTER

TO: Amendment Section Division of Corporations						
11010	TO REFINISHES TWE					
DOCUMENT NUMBER: P140000 743 05						
The enclosed Articles of Correction and fee	are submitted for filing.					
Please return all correspondence concerning	this matter to the following:					
JEFF GAUDIN Name of Contact Person	· · · · · · · · · · · · · · · · · · ·					
GALBIN AUTO REFINISHE	ces The					
601 NE 33RA ST Address						
CCALA FZ 34474 City/State and Zip Code	?					
CAS TRX 1040 (2) Becesor E-mail address: (to be used for future annual repo	nt notification)					
For further information concerning this matt	er, please call:					
JEFF GAUDIN Name of Contact Person	at (954) 245-5600 Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount	nt:					
\$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

JAU	DINS ALTE	SEFINIS	THES =	Twe	
	Name of Corporation as currently f	filed with the Florida Dept. of Sta	ato		
	P140000 7	4305 nber (if known)	_		
ursuant to the provision	ons of Section 607.0124 or ction within 30 days of the	617.0124, Florida Sta file date of the docum	atutes, this corr nent being corr	ooration files ected.	
These articles of correc	tion correct Fox)	ROFIT COR.	PORATIO	<u>√</u> ,	
iled with the Departme	ent of State on 9/8	FIZO14 (File Date of Document)			
Specify the inaccuracy,	incorrect statement, or def	fect:			
SPOLING	EROR IN 1	NAME			
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				SS	
	incorrect statement, or det Auro Acr		Two		y. 3%
<u>x</u>	Signature of a director, president or of a directed, by an incorporator other court appointed fiduciary, by the	- if in the hands of the receiver,	ers have trustee, or		
JEFF GAU (Typed or prin	Acd name of person signing)		Press (Title of pe	rson signing)	
6					,

Filing Fee: \$35.00