## P14000086166

(Requestor's Name)  (Address)	600353332716	
(Address)	00000002770	
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(Business Entity Name)	10/09/2001014021 **52.50	
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Silver Lining Without border, S Co	яр
SUBJECT:	
P14000086166	lame of Corporation
DOCUMENT NUMBER:	
The enclosed Articles of Correction and fe	e are submitted for filing.
Please return all correspondence concernir	ng this matter to the following:
Saleh Parvez	
Name of Contact Person	
Silver Lining without border	
Firm/Company 6101 Grosvenor shore drive	
Address	
Windermere, FL 34786	
City/State and Zip Code	
globiey2k@yahoo.com	
E-mail address: (to be used for future annual re	port notification)
For further information concerning this ma	
Saleh Parvez	407 748-0674
Name of Contact Person	at () Area Code Daytime Telephone Number
Enclosed is a check for the following amou	int:
□ \$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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## ARTICLES OF CORRECTION

For

	arrently filed with the Florida Dept, of State	
P14000086166		
Docum	nent Number (if known)	
Pursuant to the provisions of Section 607.012	24, Florida Statutes.	, , 100
These articles of correction correct Art	(Document Type Being Corrected)	
filed with the Department of State on	, ,,	
Specify the inaccuracy, incorrect statement, of	or defect:	
Under Electronic articles of the corporation filed 10	0//20/2014,	
Article IV:		
The number of shares the coporation is authorized t	to issue is .001 which is Incorrect	-2.
Correct the inaccuracy, incorrect statement, or	or defect:	
Article IV should read >>>		<del></del>
The number of shares the coporation is authorized t	to issue is 100	
		<del>- ,.</del>
Thanks		<u> </u>
	bin.	
	ent or other officer - if directors or officers have norator - if in the hands of the receiver, trustee, or y, by that fiduciary.)	
Saleh Parvez, MD	Agent and COO	
(Typed or printed name of person signing)	(Title of person sig	minus)

Filing Fee: \$35.00