

P14000086881

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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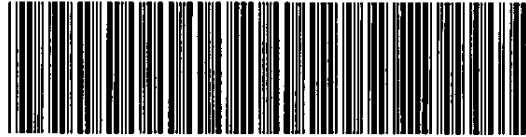
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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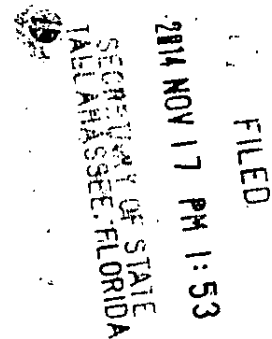
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Articles of
Correction

11/17/14--01025--020 **35.00



DR

11 / 2 / 14

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Weston Zuela Remodeling and Design
Name of Corporation

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Carla Caride
Name of Contact Person

Weston Zuela Remodeling and Design
Firm/Company

14661 Vista Verdi Rd
Address

Davie FL 33325
City/State and Zip Code

VSGC BROWARD@Gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Javier Gonzalez at (954) 756-4780
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

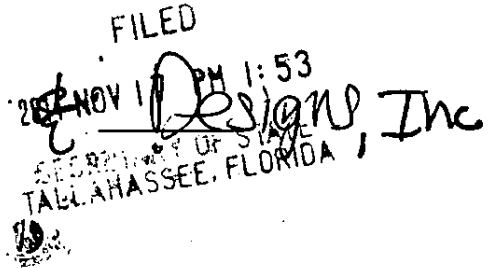
ARTICLES OF CORRECTION

For

Weston Zwick Remodeling

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

Document Number (if known)



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 Articles of Incorporation

filed with the Department of State on 10-22-14

Specify the inaccuracy, incorrect statement, or defect:

effective date
Please Change the date we started
in begining business to Jan 1st, 2015

Correct the inaccuracy, incorrect statement, or defect:

[Signature]

(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.)

Dark Paride

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35.00