

715 0000 11807

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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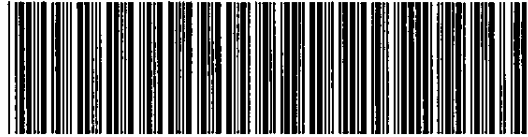
(Business Entity Name)

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

FEB 20 2015
S. CARROLL

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: EC SYSTEMS INC.

Name of Corporation

DOCUMENT NUMBER: P15000011807

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

Please return all correspondence concerning this matter to the following:

MARSHA SIHA

Name of Contact Person

INCFILE.COM LLC

Firm/Company

134 VINTAGE PARK BLVD A-50

Address

HOUSTON TX 77070

City/State and Zip Code

ZAC@POWEREDHOUSE.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARSHA SIHA

Name of Contact Person

at (**888**) **462-3453**

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

EC SYSTEMS INC.

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

P15000011807

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

(Document Type Being Corrected)

filed with the Department of State on 02/05/2015

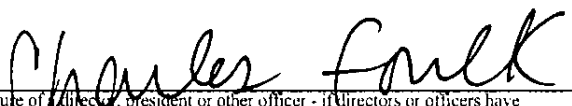
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

ARTICLE VII DIRECTOR LAST NAME: POULK

Correct the inaccuracy, incorrect statement, or defect:

ARTICLE VII DIRECTOR LAST NAME: FOULK


(Signature of 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.)

CHARLES FOULK

(Typed or printed name of person signing)

DIRECTOR

(Title of person signing)

Filing Fee: \$35.00

FILED
15 FEB 19 AM 10:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA