

P/5000014764

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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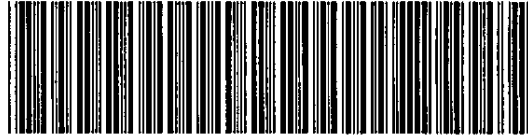
(Business Entity Name)

(Document Number)

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Articles of
Correction

02/27/15--01009--019 **35.00

FILED
2015 FEB 27 PM 4:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RR
3/2/15

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Complete Auto Advertising Service C.M.B.
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:

Frank Ruenes

Name of Contact Person

Complete Auto Advertising Service C.M.B. Inc.

Firm/Company

361 Martin Ave #1

Address

Greenacres Fl, 33463

City/State and Zip Code

completeautoadv@aol.com

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

For further information concerning this matter, please call:

Frank Ruenes

561

231-1465

at ()

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

Complete Auto Advertising Service C.M.B. Inc.

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

Document Number (if known)

FILED

2015 FEB 27 PM 4:17

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Articles of Incorporation

These articles of correction correct

(Document Type Being Corrected)

February 12, 2015

filed with the Department of State on

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

(Article 5) President: Frank Allen Ruenes

(Article 5) Treasurer: Frank Allen Ruenes

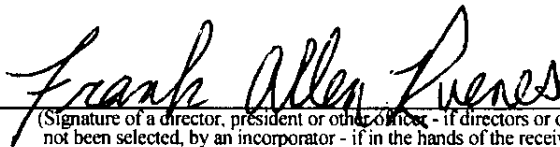
(Article 6) Omitted one Director

Correct the inaccuracy, incorrect statement, or defect:

(Article 5) President: Casey McCall Schilling

(Article 5) Treasurer: Kristy Darlene Schilling

(Article 6) Add Additional Director: Casey McCall Schilling



(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.)

Frank Allen Ruenes

(Typed or printed name of person signing)

Director/President

(Title of person signing)

Filing Fee: \$35.00