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COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations	
SUBJECT: UNITED INCOME	VERIFICATION SERVICES, INC.
DOCUMENT NUMBER: P1500	
The enclosed Articles of Correction and fe	e are submitted for filing.
Please return all correspondence concernir	ng this matter to the following:
WANDA L. BALDWIN	<u> </u>
UNITED INCOME VERIFIC	CATION SERVICE, INC
37020 NATURES EDGE	TRAIL
EUSTIS FC 32736 City/State and Zip Code	
ORDERS QUNITEDINCOM E-malf and dress: (to be used for future annual re	DEVS. COM
For further information concerning this ma	atter, please call:
WANDA BALDWIN Name of Contact Person	at (352) 483-1779 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount	unt:
\$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	Street Address: Amendment Section
Division of Corporations	Division of Corporations

Clifton Building

Tallahassee, FL 32301

2661 Executive Center Circle

ARTICLES OF CORRECTION

For

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UNITED INCOME VERIFICATION SERVICES, INC. Name of Corporation as currently filed with the Florida Dept. of State
P15000023713 Document Number (if known) 5
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 <u>ARTICLES OF INCORPORATION</u> , (Document Type Being Corrected)
filed with the Department of State on 3615 (File Date of Document)
Specify the inaccuracy, incorrect statement, or defect:
The Company name
Registered Agent
3. Director's
Correct the inaccuracy, incorrect statement, or defect:
1. UNITED INCOME VERIFICATION SERVICE, INC.
(should not have an "S" at the end of service)
2. Registered Agent should be "WANDA L. BALDWIN"
(not "Devon Viera same address)
3. Director's should only be-WANDA L. BALDWIN and
Laura Delehanty (Please remove Devon Viera, Keep
Same address for both)
(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.)
WANDA L. BALDWIN (Typed or printed name of person signing) OWNER DIRECTOR (Title of person signing)

Filing Fee: \$35.00