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K. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: BB'S APIARIES, I	NC.		
DOCUMENT NUMBER: P1500003156	'		
The enclosed Articles of Correction and fee a	re submitted for filing.		
Please return all correspondence concerning t	his matter to the following:		
FRANCES C. LOWE			
Name of Contact Person			
GUILDAY, SCHWARTZ, SIMPSON, WEST, HATC	H & LOWE, P.A.		
Firin/Company			
3042 CRAWFORDVILLE H	IGHWAY		
CRAWFORDVILLE, FL	32327		
City/State and Zip Code			
francie@francielowe.com			
E-mail address: (to be used for future annual report	notification)		
For further information concerning this matter, please call:			
FRANCES C. LOWE	at (850) 926-8245		
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		
4			

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

THEFO

For

15 APR 13 PH 2: 17

BB'S APIARIES, INC.

SLUNG MAY OF STATE TALLAHASSEE, FLORIDA

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

P15000031560

Document Number (if known)

These articles of correction correct ARTICLES OF INCORPORATION	
(Document Type Being Corrected)	,
filed with the Department of State on 4/6/2015	
(File Date of Document)	
Specify the inaccuracy, incorrect statement, or defect:	
President, Langston, Gary	
	
Correct the inaccuracy, incorrect statement, or defect:	
President, Langston, Wesley Gary	
Troductit, Earligatori, Tradicy Cary	
	

(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.)

Frances C. Lowe

Registered Agent/Incorporator

(Typed or printed name of person signing)

(Title of person signing)

Filing Fee: \$35.00