

P150000673R

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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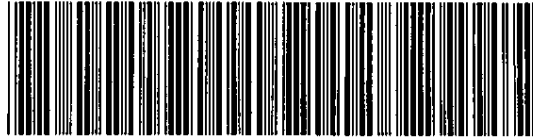
(Business Entity Name)

(Document Number)

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15 AUG 17 AM 6:25  
TALLAHASSEE, FLORIDA

*Col*

AUG 18 2015

R. WHITE

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Calabaza Transport, Corp.  
Name of Corporation

**DOCUMENT NUMBER:** P15000067348

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

Please return all correspondence concerning this matter to the following:

Liliana Hadfeg

Name of Contact Person

Calabaza Transport, Corp.

Firm/Company

5891 W 9th Lane

Address

Hialeah, Florida 33012

City/State and Zip Code

Lilianahadfeg@aol.com

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

For further information concerning this matter, please call:

Liliana Hadfeg

Name of Contact Person

at ( 786 ) 357-8111

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

15 AUG 17 AM 6:25

Calabaza Transport, Corp.

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

P15000067348

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 Corporation  
(Document Type Being Corrected)

filed with the Department of State on 8/10/15  
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

I left the officer information section blank.

Correct the inaccuracy, incorrect statement, or defect:

I would like to include the officer name to be Jennifer D.Lopez

(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.)

Jennifer D. Lopez

President

(Typed or printed name of person signing)

- President -

(Title of person signing)

Filing Fee: \$35.00