

P16000015387

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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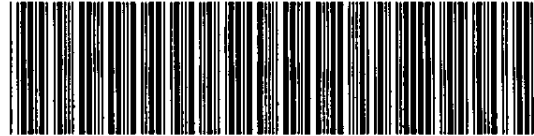
(Business Entity Name)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: RENAISSANCE HAIR DESIGN AND BEAUTY SALON, INC
Name of Corporation

DOCUMENT NUMBER: P16000015387

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

Please return all correspondence concerning this matter to the following:

MILAGROS SUAREZ

Name of Contact Person

RENAISSANCE HAIR DESIGN AND BEAUTY SALON, INC

Firm/Company

13710 SW 56TH STREET SUITE D

Address

MIAMI, FLORIDA 33175

City/State and Zip Code

MILLIES@BELLSOUTH.NET

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

For further information concerning this matter, please call:

MILAGROS SUAREZ at (**786**) **2297782**

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

RENAISSANCE HAIR DESIGN AND BEAUTY SALON, INC

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

P16000015387

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 **SECRETARY**

(Document Type Being Corrected)

filed with the Department of State on **02/16/2016**

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

OBMISSION OF SECRETARY BY MISTAKE

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Correct the inaccuracy, incorrect statement, or defect:

SECRETARY: MARIA ELVIRA FRANCO

(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.)

MILAGROS SUAREZ

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35.00