

P16000020423

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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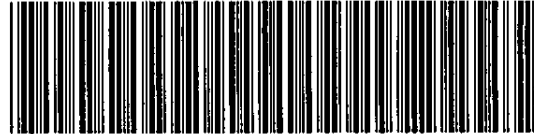
(Business Entity Name)

(Document Number)

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Articles of
Correction

04/05/16--01011--025 **43.75

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16 APR - 1 PM 3:44
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APR 05 2016
A RAMSEY

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FSI Fire Safety Systems, Inc.

Name of Corporation

DOCUMENT NUMBER: P16000020423

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

Please return all correspondence concerning this matter to the following:

Kirsten Kappus

Name of Contact Person

STAIS

Firm/Company

1275 Barclay Blvd

Address

Buffalo Grove, IL 60089

City/State and Zip Code

kirsten.kappus@sta-is.com

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

For further information concerning this matter, please call:

Kirsten Kappus

Name of Contact Person

at **(877) 894-0073**

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

FSI Fire Safety Systems, Inc.

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

P16000020423

Document Number (if known)

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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.

These articles of correction correct Articles of Incorporation,
(Document Type Being Corrected)

filed with the Department of State on March 2, 2016.
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

Registered Agent: Mina Baywood

Director: Mina Baywood

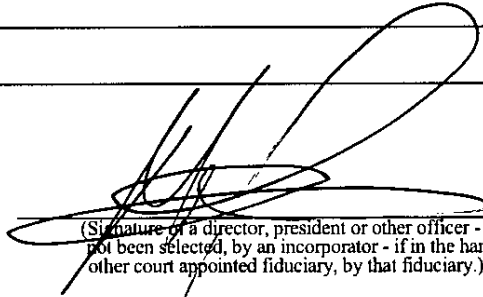
Incorporator: Mina Baywood

Correct the inaccuracy, incorrect statement, or defect:

Registered Agent: Mina Bayood

Director: Mina Bayood

Incorporator: Mina Bayood


(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.)

Mina Bayood

(Typed or printed name of person signing)

Incorporator

(Title of person signing)

Filing Fee: \$35.00