P16000037063

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	:#)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nam	ne)		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				





900285313189

05/04/16--01011--025 **35.00

SECRETARY OF STATE
DIVISION OF CORPORATION

MAY - 5 2016 C LEWIS

COVER LETTER

Amendment Section Division of Corporations Muphy's Blinds Inc. **SUBJECT:** Name of Corporation P16000037063 **DOCUMENT NUMBER:** The enclosed Articles of Correction and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Chad R Murphy Name of Contact Person Murphy's Blinds Inc Firm/Company 2455 Crane ct Address Saint Cloud, FI, 34771 City/State and Zip Code dcandt@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Chad R Murphy 407 569-6193 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 ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy □ \$43.75 Filing Fee & Certified Copy **Mailing Address:** Street Address: Amendment Section Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF CORRECTION

DIVISION OF CORPORATIONS

(Title of person signing)

	F	or	STORE COL	的遊話
Muphy's Blinds Inc) .		16 MAY -3 P	PM 1: 09
	Name of Corporation as currently	filed with the Florida Dept. of State		
	p16000037063			
	Document Nu	mber (if known)		
Pursuant to the provision these Articles of Correcti	on within 30 days of the	file date of the docume	nt being corrected.	
These articles of correction	on correct Article	SOF INCOM	Poration	J
	A	O.4.0	recieu)	
filed with the Departmen	t of State on	(File Date of Document)	·	
Specify the inaccuracy, in Misspelled name of bu			s to be	
Murphy's Blinds inc				
			·	
* · · · · · · · · · · · · · · · · · · ·		***************************************		
Correct the inaccuracy, in Change Name to Mur		fect:	• • • • • • • • • • • • • • • • • • • •	
	····			
	Signature of a director, president or or not been selected, by an incorporator other court appointed fiduciary, by the		nave lee, or	
Chad R Murphy		pre	esident	

Filing Fee: \$35.00

(Typed or printed name of person signing)