## P16000068448

| (Document Number)                       |  |  |
|---|--|--|
| _                                       |  |  |
| Special Instructions to Filing Officer: |  |  |
|   |  |  |
|   |  |  |
|   |  |  |
|   |  |  |
|   |  |  |





300289578163

08/29/16--01033--005 \*\*35.00

2016 AUG 29 PM 1-12

SEP 1 3 2016

C LEWIS

## **COVER LETTER**

| TO: Amendment Section Division of Corporations  |  |  |
|---|--|--|
| SUBJECT: Way boss  DOCUMENT NUMBER: P 16 00   | Tnc<br>me of Corporation   |  |
| The enclosed Articles of Correction and fee are submitted for filing.                           |  |  |
| Please return all correspondence concerning this matter to the following:                       |  |  |
| Shawn Ace've Name of Contact Person   | edo  |  |
| Firm/Company  | <del> </del>   |  |
| 11 Plaza Real   | South # 603  |  |
| Boca Raton City/State and Zip Code  | -L 33432   |  |
| Jacqueline behar  B-mal address: (to be used for future annual rep                              | ie Q a mail, com ort notification)   |  |
| For further information concerning this matter, please call:                                    |  |  |
| Richard Pollock Name of Contact Person  | at (954) 726-2537  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 |  |

FILED SECRETARY OF STATE DIVISION OF CORPORATION

2016 AUG 29 PM 1: 13

## ARTICLES OF CORRECTION

For

| PILOOOO68448  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 Spelling of Name of registered   |
| filed with the Department of State on (Min Date of Document)  |
| Specify the inaccuracy, incorrect statement, or defect:   |
| Shown Acenedo   |
|   |
| ,   |
|   |
| Correct the inaccuracy, incorrect statement, or defect:   |
| Shawn Acevedo   |
|   |
|   |
| Catignature of a director, president or ethoralities? 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.) |
| Shaws Ace ve do  (Typed or privated name of person signing)  (Title of person signing)  |

Filing Fee: \$35.00