

P1600007755

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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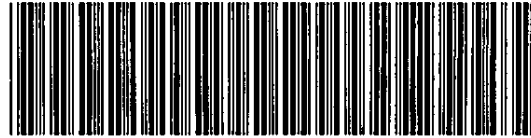
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PASSION EYES INC

Name of Corporation

DOCUMENT NUMBER: P16000077755

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

Please return all correspondence concerning this matter to the following:

RON WAGSHOL, CPA

Name of Contact Person

Firm/Company

6415 LAKE WORTH RD

Address

LAKE WORTH, FL 33463

City/State and Zip Code

CORMATTAXSERVICE@BELLSOUTH.NET

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

For further information concerning this matter, please call:

RON WAGSHOL

Name of Contact Person

at (**561**) **357-8877**

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

PASSION EYES INC

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

P16000077755

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 **ARTICLES OF INCORPORATION**

(Document Type Being Corrected)

filed with the Department of State on **9/22/2016**

(File Date of Document)


Specify the inaccuracy, incorrect statement, or defect:

INCORRECT NAME OF CORPORATION

INCORRECT NAME WAS: PASSION EYES INC

Correct the inaccuracy, incorrect statement, or defect:

CORRECT NAME IS: PASSIONEYES INC


(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.)

NICOLA LAVACCA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

2016 SEP 26 AM 2:33

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DEPARTMENT OF STATE
HALL OF RECORDS
TALLAHASSEE, FLORIDA