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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: RW LANDSCAF			
DOCUMENT NUMBER: P16000082	lame of Corporation		
The enclosed Articles of Correction and fe	e are submitted for	or filing.	
Please return all correspondence concerning	ng this matter to the	he following:	
ROBERT FRITSCH			
Name of Contact Person		• •	
RW LANDSCAPING		_	
7239 SPRING VILLAS	CIP		
Address	CIK	•	
ORLANDO FLORIDA, City/State and Zip Code	32819	-	
CFRITSCH@CFL.RR.		_	
E-mail address: (to be used for future annual re	port notification)		
For further information concerning this ma	atter, please call:		
ROBERT FRITSCH	att	,272-8856	
Name of Contact Person	Area Cod	e & Daytime Telephone Number	
		,	
Enclosed is a check for the following amount	unt:		
■ \$35.00 Filing Fee CHECK 4 561	☐ \$43.75 Filing Fee & Certificate of Status		
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Mailing Address:	Street Address	<u>s:</u>	
Amendment Section	Amendment Section		
Division of Corporations P.O. Box 6327	Division of Corporations Clifton Building		
Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

ARTICLES OF CORRECTION

For

P16000082007		
Document Number (if known)		
Pursuant to the provisions of Section 607.0124 or 617.0124, Florid these Articles of Correction within 30 days of the file date of the do	a Statutes, this corporation ocument being corrected.	files
These articles of correction correct FLORIDA CORPORATION (Document Type I	ON FILING	
filed with the Department of State on 10-10-16	,	
(File Date of Document)	•	
Specify the inaccuracy, incorrect statement, or defect:		
MISS SPELLING ON CORPORATION NAME.	garting distribution of the second se	2016
LANDSCAP"E"ING THE "E" WAS ENTERED M	IY MISTAKE 《系	CI T
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Correct the inaccuracy, incorrect statement, or defect: LANDSCAPEING SHOULD BE ENTERED AS "LA	ANDSCAPING",,,,NO) "E"
(Signature of a director, president or other officer - if directors or the been selected, by an incorporator - if in the hands of the reconstructor of the r	r officers have eiver, trustee, or	
ROBERT FRITSCH	PRESIDENT	

Filing Fee: \$35.00