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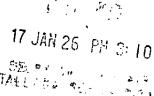
K. WHITE

COVER LETTER

Division of Corporations		
SUBJECT: MYMP CORP		
Name of Corporation DOCUMENT NUMBER: P17000004621		
The enclosed Articles of Correction and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
ABEL FERNANDEZ		
Name of Contact Person		
MYMP CORP	 	
907 WINDROSE DR		
ORLANDO/FLORIDA/32824		
MYMPCORP@HOTMAIL.COM		
E-mail address: (to be used for future annual rep	ort notification)	
For further information concerning this matter, please call:		
ESLEDY FERNANDEZ Name of Contact Person at (407) 451-7621 Area Code & Daytime Telephone Number		
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	
□ \$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



M.Y.M.P CORP
Name of Corporation as currently filed with the Florida Dept. of State
P17000004621
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 correctMYMP CORP
(Document Type Being Corrected) filed with the Department of State on(File Date of Document)
Specify the inaccuracy, incorrect statement, or defect:
INCORRECT NAME FOR THE COORPORATION:M.Y.M.P CORP
OLD PRINCIPAL ADDRESS:1161 S OBT SUITE 3,ORLANDO,FL,32837
EIN :NONE
OLD EMAIL:AFERNANDEZ123@CFL.RR.COM
Correct the inaccuracy, incorrect statement, or defect: CORRECT NAME FOR THE COORPORATION: MYMP CORP
CURRENT PRINCIPAL ADDRESS:11400 S. ORANGE AVE, ORLANDO, FL, 32824
EIN:81-5018707
EMAIL:MYMPCORP@HOTMAIL.COM
MAILING ADDRESS:907 WINDROSE DR,ORLANDO,FL,32824

(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.)

ABEL FERNANDEZ EXPOSITO

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35.00