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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Super-Kids Interactive Inc.
Name of Corporation

DOCUMENT NUMBER: _____

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

Please return all correspondence concerning this matter to the following:

Olivia Zicchinelli
Name of Contact Person

Super-Kids Interactive, Inc.
Firm/Company

6347 La Costa Dr. Apt. K
Address

Boca Raton, FL. 33433
City/State and Zip Code

Olivia.Zicchinelli@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Olivia Zicchinelli at (864) 346-2593
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

Super-Kids Interactive, Inc.

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

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 Effective date

(Document Type Being Corrected)

filed with the Department of State on January 17, 2017

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

Incorrect effective date of March 1, 2017

Correct the inaccuracy, incorrect statement, or defect:

I would like to amend the effective date to reflect the date of February 1, 2017.

Olivia Zicchinelli

(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)

Olivia Zicchinelli

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35.00