P17000053990

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations

$_{ m SUBJECT:}$ SUPER FRESCURA CORP

Name of Corporation

DOCUMENT NUMBER: P17000053990

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

Please return all correspondence concerning this matter to the following:

Edna Lombo

Name of Contact Person

Firm/Company

121 SW 66 Avenue

Addres

Miami, FL. 33144

City/State and Zip Code

elombo@aol.com

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

For further information concerning this matter, please call:

Edna Lombo

...786

223-5619

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 FRESURA CORP

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

P17000053990

1 17 00 00 00 00 00
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 Name of the Corporation
(Execument Type Being Corrected)
filed with the Department of State on O7/05/2017 (File Date of Document)
Specify the inaccuracy, incorrect statement, or defect:
Fresura Corp
<u> </u>
Correct the inaccuracy, incorrect statement, or defect:
Frescura Super Frescura CORP
·
(Signature of a director, president or other officer - it 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.)
Aristides Rivera Pres
(Typed or printed name of person signing) (Title of person signing)

Filing Fee: \$35.00