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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: GILBALL CORP	Name of Corporation	
DOCUMENT NUMBER: P1700008	•	
The enclosed Articles of Correction and fe		or filing.
Please return all correspondence concerni	ng this matter to the	he following:
JAIRO GIL		
Name of Contact Person	···	•
GILBALL CORP		
Firm/Company		-
5831 SW 137 Av		_
Address		
Miami, Florida 33183 City/State and Zip Code		-
jairogil1973@icloud.com		
E-mail address: (to be used for future annual r	eport notification)	-
For further information concerning this m	atter, please call:	
Jairo Gil	_{at (} 786	3702969
Name of Contact Person	Area Code	& Daytime Telephone Number
Enclosed is a check for the following amo	ount:	
■ \$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:	Street Address	
Amendment Section Division of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle	

Tallahassee, FL 32301

ARTICLES OF CORRECTION

For

GILBALL CORP	
Name of Corporation as currently filed with the Florida Dept. of	f State
P17000084146	
Document Number (if known)	
Pursuant to the provisions of Section 607.0124 or 617.0124, Florida these Articles of Correction within 30 days of the file date of the doc	Statutes, this corporation files ument being corrected.
These articles of correction correct Articles of Incorporation	•
filed with the Department of State on October 18, 2017 (File Date of Document)	ng Corrected)
Specify the inaccuracy, incorrect statement, or defect:	
Registered Agent	
JAIRO H GIL	F 42
The middle initial is not correct	10 H
	in and and and and and and and and and an
	[1]. Ti []
	S., (T.)
	<u>ت</u> کا
Correct the inaccuracy, incorrect statement, or defect: Registered Agent	
JAIRO GIL	
	

(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 tiduciary, by that fiduciary.)

WILLIAM BALLESTEROS

(Typed or printed name of person signing)

Filing Fee: \$35.00

