P18000009782

(Requestor's Name)			
(Address)			
(Address)			
,			
(Civ. Chara Chia/Dhana 40			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Basiless Entity Harrey			
(Document Number)			
Certified Copies Certificates of Status			
2			
Special Instructions to Filing Officer:			

Office Use Only



000419801940

12/04/23--01018-+011 **35.00

DIVISION OF CORPORATIONS

DIVISION OF CORPORATIONS



COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: LAW Office of	E Shaman D. de Jesus, P.	Ά.	
DOCUMENT NUMBER: P 1800	0009782		
The enclosed Articles of Correction and fee	are submitted for filing.		
Please return all correspondence concerning	this matter to the following:		
Shannan D. de Jo	esus		
(firm was closed	/ dissolved in 2002)		
4960 Hwy 90 # 17	<u>'0</u>		
Pace FL 3257! City/State and Zip Code			SIAID
ZITON CLSCLE SUS Q QN E-mail address: (to be used for future annual repo	nail. com ort notification)	2023 DEC -4	
For further information concerning this matter	ter, please call:	72	- 3909. - 3909.
Shanga D. de Jesus Name of Contact Person	at (970) 203-4599 Area Code Daytime Telephone Number	PM 12: 40	210 K
Enclosed is a check for the following amour	nt:		
\$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	Street Address: Amendment Section Division of Corporations The Centre of Tallahassee		

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF CORRECTION

For

Law Office. of Shanan D. de Jesus P.A. Name of Corporation as currently filed with the Florida Dept. of State
P 1 8 00 000 9 782 Document Number (if known)
Pursuant to the provisions of Section 607.0124, Florida Statutes. These articles of correction correct Notice of Congrete Dissolution (I. Articles of Observation (I. Art
The renainder of the original filing is correct. Correct the inaccuracy, incorrect statement, or defect: The mailing address where claims can be sent: 4960 Hury 90 #170 Paice FL 32571 Atta: Shaman de Jessis
(Signature of a director, president or other officer - indirectors or officers have not been selected, by an incorporator - it in the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.) (Typed or printed name of person signing) (Typed or printed name of person signing) (Con Yarry Closed # dissolved)