

P18000031688

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100311748311

04/11/18--01013--006 **52.50

2018 APR 11 PM 12:38

APR 12 11:30
C. McHAIR

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: EASTPORT CLEANING COMPANY

Name of Corporation

DOCUMENT NUMBER: P18000031688

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

Please return all correspondence concerning this matter to the following:

Laura Moyer

Name of Contact Person

Firm/Company

1180 Welsh Rd, Suite 280

Address

North Wales, PA 19454

City/State and Zip Code

lmoyer@benetrends.com

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

For further information concerning this matter, please call:

Laura Moyer at (**267**) **638-9291**

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

2018 APR 11 PM 12:36

ARTICLES OF CORRECTION

For
Eastport Cleaning Company

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

P18000031688

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 Article VII- Officer/Director Last Name,
(Document Type Being Corrected)

filed with the Department of State on April 3, 2018.
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

Title: VPSD

John Novack

264 Cerromar Way S

Venice, FL. 34293 US

Correct the inaccuracy, incorrect statement, or defect:

Title: VPSD

John Garrett

264 Cerromar Way S

Venice, FL. 34293 US



(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.)

Laura Moyer

(Typed or printed name of person signing)

Incorporator

(Title of person signing)

Filing Fee: \$35.00

2018 APR 11 PM 12:26
FILED
CLERK OF COURT
JAN 11 2018