

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
		MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use On	



06/07/18--01022--007 **35.00

FILED 2018 JUN-7 AMII: 37 SECRETARY OF STATE TALLAHASSEE. FLORID

C. GOLDEN JUN - 8 2018

COVER LETTER

TO: Amendment Section **Division of Corporations**

SUBJECT: SKYLINE 2601CORP. Name of Corporation

DOCUMENT NUMBER: P18000044987

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

Please return all correspondence concerning this matter to the following:

Sofia Powell-Cosio

Name of Contact Person

Sofia Powell-Cosio P.A.

Firm/Company

1900 SW 3rd Avenue

Address

Miami, Florida 33129

City/State and Zip Code

spcmgmtservices@gmail.com

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

For further information concerning this matter, please call:

Sofia Powell-Cosio

Name of Contact Person

at (<u>305</u>)579-9988

Enclosed is a check for the following amount:

S35.00 Filing Fee

□ \$43.75 Filing Fee & Certificate of Status

□ \$43.75 Filing Fee & Certified Copy

S52.50 Filing Fee, Certificate of Status & Certified Copy

Mailing Address:

Ľ

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

SKYLINE 2601 CORP.

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

P18000044987

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. Articles of In . . .

These articles of correction correct Articles of incorporation
(Document Type Being Corrected)
filed with the Department of State on May 15, 2018
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

Register Agent address

Incorporator address

3. Officer and/or Director Title

Correct the inaccuracy, incorrect statement, or defect:

1. Register Agent correct address: : 1900 SW 3rd Avenue, Miami, Florida 33129

2. Incorporator Address: 1900 SW 3rd Avenue, Miami, Florida 33129

Officer and/or Director Title should be P/VP/Secretary

(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.)

Sofia Powell-Cosio

ſ

Registere Agent/Incorporator

(Typed or printed name of person signing)

(Title of person signing)

FILED

2018 JUN -7 AM 11: 37

SECRETARY OF STATE TALLAHASSEE, FLORIDA