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STATE
TALLAHASSEE
FLORIDA

Cor NC

R. WHITE

JUN 15 2011

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: **GREY BARN INC**

Name of Corporation

DOCUMENT NUMBER: **P18000047649**

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

Please return all correspondence concerning this matter to the following:

ADRIAN MORLANNE

Name of Contact Person

Firm/Company

6301 SW 185 WAY

Address

SOUTHWEST RANCHES, FL 3: 33332

City/State and Zip Code

BADAD@MSN.COM

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

For further information concerning this matter, please call:

ADRIAN MORLANNE at **(954) 470-1061**

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

FILED

ARTICLES OF CORRECTION

18 JUN 14 AM 8:44

For

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

GREY BARN INC

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

P18000047649

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 P18000047649
(Document Type Being Corrected)


filed with the Department of State on 05/23/2018
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

GREY BARN INC

Correct the inaccuracy, incorrect statement, or defect:

GRAY BARN INC



(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.)

JORGE SOLANO

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35.00