

P19000006136

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

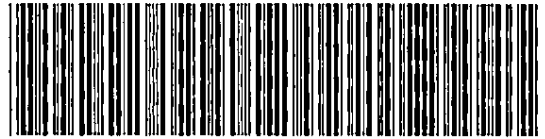
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2019 MAR - 1 P 9 12

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T. LEMIEUX

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: EDUARDO'S NURSERY INC

Name of Corporation

DOCUMENT NUMBER: P19000006136

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

Please return all correspondence concerning this matter to the following:

EDUARDO PEREZ HERNANDEZ

Name of Contact Person

EDUARDO'S NURSERY INC

Firm/Company

19780 SW 177TH AVE #329

Address

MIAMI, FL 33187

City/State and Zip Code

hernandezlourdes87@yahoo.com

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

For further information concerning this matter, please call:

EDUARDO PEREZ HERNANDEZ at (**786**) **255-4957**

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | |
|--|---|
| <input checked="" type="checkbox"/> \$35.00 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status |
| <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$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

ARTICLES OF CORRECTION

For

EDUARDO'S NURSERY INC

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

P19000006136

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
(Document Type Being Corrected)

filed with the Department of State on FLORIDA
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

THE PRESIDENT LAST NAME SHOWS EDUARDO PEREZ HERANANDEZ

Correct the inaccuracy, incorrect statement, or defect:

EDUARDO PEREZ HERNANDEZ

FILED
2019 MAR -1 P 09 12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(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.)

EDUARDO PEREZ HERNANDEZ

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35.00