

P19000030550

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

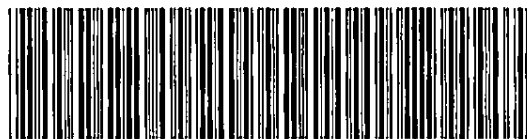
(Business Entity Name)

(Document Number)

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R. WHITE
APR 29 2019

FILED
2019 APR 29 AM 8:59
TOLSON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Lopez Garden Designs Inc.
Name of Corporation

DOCUMENT NUMBER: P19000030550

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

Please return all correspondence concerning this matter to the following:

Alexander Lopez
Name of Contact Person

Lopez Garden Designs.
Firm/Company

3509 SW Kronkey Street.
Address

Port St. Lucie, FL 34953
City/State and Zip Code

Alex. Lopez @ @ @ yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alexander Lopez at (772) 333 0161
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

ARTICLES OF CORRECTION

FILED

For

Lopez Garden Designs INC 2019 APR 22 AM 8:59

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

P19000030550

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 VP NAME,
(Document Type Being Corrected)

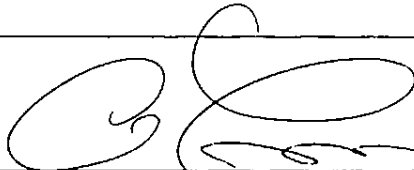
filed with the Department of State on 4/4/2019.
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

Title VP: Lopez, Carla V

Correct the inaccuracy, incorrect statement, or defect:

please correct to.
Title VP: Lopez @ 4/17
JACEN-LOPEZ, CARLA
(NO MIDDLE INITIAL)



(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.)

Alexander Lopez

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35.00