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COVER LETTER

TO: Amendment Section Division of Corporations	
·	SOUTHERN COOKING INC.
DOCUMENT NUMBER: P1900	00090577
The enclosed Articles of Correction and fe	ee are submitted for filing.
Please return all correspondence concernir	ng this matter to the following:
ANTHONY CHA	APMAN
CHAPMAN'S SOUT	HERN COOKING INC.
3026 ROYAL PAL	MAVENUE
FORT MYERS FLO City/State and Zip Code	DRIDA 33901
PUCK 2023 & AOI E-mail address: (to be used for future annual re	port notification)
For further information concerning this ma	atter, please call:
ANTHONY CHAPMA	w at (239)357-4808 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount	unt:
\$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

For

CHAPMAN'S SOUTHERN COOKING Name of Corporation as currently filed with the Florida Dept. of State	INI	_	_
P 190000 405 44 Document Number (if known)			
Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this of these Articles of Correction within 30 days of the file date of the document being of the document being of the file date of the document being of the file date of the document being of the date of the document being of the date of the document being of the date of	corpora correcte	tion fil d.	les
These articles of correction correct APTICLES OF INCO	RPO	RATI	01
filed with the Department of State on [File Day of Document]			
Specify the inaccuracy, incorrect statement, or defect:			
ANTHONY CHAPMAN SR SHOULD	BI		
ANTHONY CHAPMAN			
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Correct the inaccuracy, incorrect statement, or defect:		24	1
ANTHONY CHAPMAN		Æ	
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(Signature of a director, prysident 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.)

(Typed or printed name of person signing)

Filing Fee: \$35.00