

P19 000047819

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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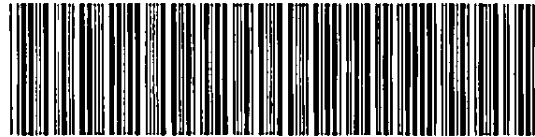
(Business Entity Name)

(Document Number)

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SEP 28 2021  
ALBRITTON

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** LAM RESTAURATIONS & REFINISHINGS CORP  
Name of Corporation

**DOCUMENT NUMBER:** P19000047819

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

Please return all correspondence concerning this matter to the following:

LUISA F MONTES DE OCA

Name of Contact Person

LAM RESTORATIONS & REFINISHINGS CORP

Firm/Company

450 JEFFERSON DR APT 104

Address

DEERFIELD BEACH FL 33442

City/State and Zip Code

luisanani@aol.com

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

For further information concerning this matter, please call:

Marda Montes de Oca

Name of Contact Person

at ( 954 )

Area Code

8568799

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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

2021 SEP 27 PM 3:46

July 23, 2021

LUISA F. MONTES DE OCA  
450 JEFFERSON DR  
APT. 104  
DEERFIELD BEACH, FL 33442

SUBJECT: LAM RESTAURATIONS & REFINISHINGS CORP  
Ref. Number: P19000047819

We have received your document for LAM RESTAURATIONS & REFINISHINGS CORP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to sign the form.

The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton  
Regulatory Specialist II

Letter Number: 421A00017204

# ARTICLES OF CORRECTION

For

LAM RESTAURATIONS & REFINISHINGS CORP

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

P19000047819

\_\_\_\_\_  
Document Number (if known)

Pursuant to the provisions of Section 607.0124, Florida Statutes.

These articles of correction correct

Articles of Incorporation  
(Document Type Being Corrected)

filed with the Department of State on 06/04/2019

\_\_\_\_\_  
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

LAM "RESTAURATIONS" & REFINISHINGS CORP

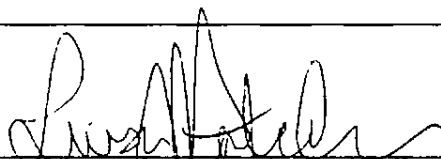
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2021 SEP 27 PM 3:57  
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Correct the inaccuracy, incorrect statement, or defect:

LAM RESTORATIONS & REFINISHINGS CORP

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



\_\_\_\_\_  
(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.)

LUISA F MONTES DE OCA

\_\_\_\_\_  
(Typed or printed name of person signing)

PRESIDENT

\_\_\_\_\_  
(Title of person signing)

**Filing Fee: \$35.00**