

P190000069017

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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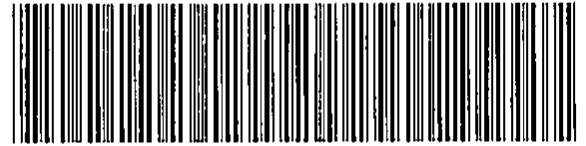
(Business Entity Name)

(Document Number)

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Ant Correction

SEP 24 2019  
1 ALBRITTON

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

LABEBE TRUCKING INC

Signature \_\_\_\_\_

Requested by: SETH

09/23/19

Name

Date

Time

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\_\_\_\_ Art of Inc. File \_\_\_\_\_  
\_\_\_\_ LTD Partnership File \_\_\_\_\_  
\_\_\_\_ Foreign Corp. File \_\_\_\_\_  
\_\_\_\_ L.C. File \_\_\_\_\_  
\_\_\_\_ Fictitious Name File \_\_\_\_\_  
\_\_\_\_ Trade/Service Mark \_\_\_\_\_  
\_\_\_\_ Merger File \_\_\_\_\_  
\_\_\_\_ Art. of Amend. File \_\_\_\_\_  
\_\_\_\_ RA Resignation \_\_\_\_\_  
\_\_\_\_ Dissolution / Withdrawal \_\_\_\_\_  
\_\_\_\_ Annual Report / Reinstatement \_\_\_\_\_  
\_\_\_\_ Cert. Copy \_\_\_\_\_  
\_\_\_\_ Photo Copy \_\_\_\_\_  
\_\_\_\_ Certificate of Good Standing \_\_\_\_\_  
\_\_\_\_ Certificate of Status \_\_\_\_\_  
\_\_\_\_ Certificate of Fictitious Name \_\_\_\_\_  
\_\_\_\_ Corp Record Search \_\_\_\_\_  
\_\_\_\_ Officer Search \_\_\_\_\_  
\_\_\_\_ Fictitious Search \_\_\_\_\_  
\_\_\_\_ Fictitious Owner Search \_\_\_\_\_  
\_\_\_\_ Vehicle Search \_\_\_\_\_  
\_\_\_\_ Driving Record \_\_\_\_\_  
\_\_\_\_ UCC 1 or 3 File \_\_\_\_\_  
\_\_\_\_ UCC 11 Search \_\_\_\_\_  
\_\_\_\_ UCC 11 Retrieval \_\_\_\_\_  
\_\_\_\_ Courier \_\_\_\_\_

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: LABEBE TRUCKING INC

Name of Corporation

DOCUMENT NUMBER: P19000069017

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

Please return all correspondence concerning this matter to the following:

MEHMET ARIN AYTAC

Name of Contact Person

Firm/Company

2101 S OCEAN DR APT 604

Address

HOLLYWOOD, FL 33019

City/State and Zip Code

LABEBETRUCKING@GMAIL.COM

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

For further information concerning this matter, please call:

MEHMET ARIN AYTAC at ( 786 ) 740-2858

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

2019 SEP 25

# ARTICLES OF CORRECTION

For

**LABEBE TRUCKING, INC.**

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

**P19000069017**

\_\_\_\_\_  
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 **ARTICLES OF INCORPORATION**,  
(Document Type Being Corrected)

filed with the Department of State on **AUGUST 28, 2019**,  
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

**THE PRINCIPAL PLACE OF BUSINESS ADDRESS:**

**2101 S OCEAN DR APT 604 HOLLYWOOD, IL 33019**

**THE MAILING ADDRESS OF THE CORPORATION IS:**

**2101 S OCEAN DR APT 604 HOLLYWOOD, IL 33019**

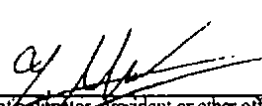
Correct the inaccuracy, incorrect statement, or defect:

**THE PRINCIPAL PLACE OF BUSINESS ADDRESS:**

**2101 S OCEAN DR APT 604, HOLLYWOOD, FL 33019**

**THE MAILING ADDRESS OF THE CORPORATION IS :**

**2101 S OCEAN DR APT 604 HOLLYWOOD, FL 33019**

  
\_\_\_\_\_  
(Signature of 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.)

**MEHMET ARIN AYTAÇ**

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

**PRESIDENT**

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

**Filing Fee: \$35.00**