## P19000081160

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Art Correction

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## **COVER LETTER**

TO:

Amendment Section

Tallahassee, FL 32314

Division of Corporations **BIERMAN MANGEMENT INC** SUBJECT: Name of Corporation P19000081160 **DOCUMENT NUMBER:** The enclosed Articles of Correction and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MILLER CARUSO Name of Contact Person MILLER & CARUSO, LLC 486 N HARBOR CITY BLVD MELBOURNE, FL 32935 City/State and Zip Code melbournetaxslayer@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: AARON BIERMAN 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: Street Address:** Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF CORRECTION

For

BIERMAN MANGEMENT INC	
Name of Corporation as currently filed with the Florida Dept. of State	
P19000081160	
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 10-16-2019 (File Date of Document)	
Specify the inaccuracy, incorrect statement, or defect: THE NAME OF THE CORPORATION WAS MISSPELLED	
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	_
	<u>-</u>
	_
Correct the inaccuracy, incorrect statement, or defect:	?
BIERMAN MANAGEMENT INC	
	_
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(Signature of director, president or other officer - if directors or officers have not been selected, by an intermediate - if in the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	
AARON BIERMAN PRESIDENT	

Filing Fee: \$35.00

(Title of person signing)

(Typed or printed name of person signing)