## P200000000173

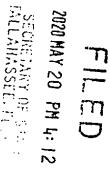
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## **COVER LETTER**

TO: Amendment Section

Division of Corporations			
SUBJECT: Re-Assure Non Emergency Transp	ortation, Inc.		
	Name of Corporation		
DOCUMENT NUMBER: P20000000	173		
The enclosed Articles of Correction and for	ee are submitte	d for filir g.	
Please return all correspondence concerni	ng this matter t	to the following:	
Paul Poteau			
Name of Contact Person			
Re-Assure Non Emergency Transportation, Ir	۱۲.		
Firm/Company			
333 SE Cork Rd			
Address		_	
Pert St, Lucie, FL 34984			
City/State and Zip Code			
reassurenet@gmail.com			
E-mail address: (to be used for future annual r	eport notification)		
For further information concerning this m	atter, please ca	II:	
Paul Poteau	561 at ( Area Cod	398-4810 ) Daytime Telephone Number	
Name of Contact Person	Area Cod	le Daytime Telephone Number	
Enclosed is a check for the following amo	ount:		
■ \$35.00 Filing Fee	□ \$43.75 F	☐ \$43.75 Filing Fee & Certificate of Status	
☐ \$43.75 Filing Fee & Certified Copy	□ \$52.50 F C	☐ \$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	

## ARTICLES OF CORRECTION

FILED

2020 MAY 20 PM 4: 12

For

Re-Assure Non Emergency Transportation, Inc.

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

SECRETARY OF SOCIAL FALLAHASSEE, FLORE

Name of Corporation as currently filed with the Plonus (App. of S	MECAINASSEL.
P2000000173	
Document Number (if known)	<del></del>
Pursuant to the provisions of Section 617.0124, Florida Statutes, this c Articles of Correction within 30 days of the file date of the document b	peing corrected.
These articles of correction correct AYACLES OF THE	Corrected).
filed with the Department of State on (File Date of Document)	·
Specify the inaccuracy, incorrect statement, or defect:	
My name is not listed as the princi	pal Officer
The county wants my name to show as the owner of the company.	
<del></del>	
Correct the inaccuracy, incorrect statement, or defect:	
· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
List my name, Paul Poteau as the owner of the company or brinci	pal officer
	,
44	
(Signature of a director, president or other officer - if directors or office not been selected, by an incorporator - if in the hands of the receiver, to other court appointed fiduciary, by that fiduciary.)	
Paul Poteau C	Owner
(Typed or printed name of person signing)	(Title of person signing)

Filing Fee: \$35.00

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