P20000 12590

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ALT COrrection

MAR 23 2020 I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: GOOD 2 P	Name of Corporation
DOCUMENT NUMBER: P200	00012590
The enclosed Articles of Correction and fe	ee are submitted for filing.
Please return all correspondence concernir	ng this matter to the following:
A/AN BERROTE Name of Contact Person	
bood 2 Pro Restor	A TION_
2 CARRIGAN Helb	4ts
Albure, Veryowi	1-05440
into a 62 p. Res E-mail address: (to be used for future annual re	storation com eport notification)
For further information concerning this ma	atter, please call:
Alaw Bennoto Name of Contact Person	at (802) 238-0111 Area Code Daytime Telephone Number
Enclosed is a check for the following amo	ount:
☐ \$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

ARTICLES OF CORRECTION

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ARTICLES OF CORRECTION For Good 2 Pro Restoration Name of Corporation as currently filed with the Florida Dept. of State
ARTICLES OF CORRECTION
For
() - 0 () - ()
Name of Corporation as currently filed with the Florida Dept. of State
P200001259D Document Number (if known)
Pursuant to the provisions of Section 607.0124, Florida Statutes.
These articles of correction correct <u>A2+1Cles of Iwcorporation</u> (Document Type Being Corrected)
filed with the Department of State on February 05, 2020 (File Date of Document)
Specify the inaccuracy, incorrect statement, or defect: EFFECTIVE SATE APRIL 5, 2020
Correct the inaccuracy, incorrect statement, or defect: MOVE EFFECTIVE BATE TO MARCH 02, 2020
(Signature of a director, president or other officer - if directors or officers have not been selected, by an incorporator - if hi the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.)
Alan Bennoto President (Typed or printed name of person signing) (Title of person signing)

Filing Fee: \$35.00