

P200002209

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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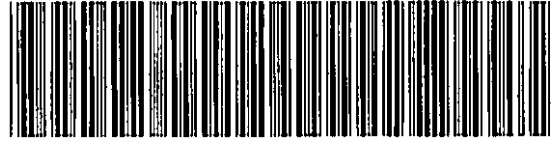
(Business Entity Name)

(Document Number)

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2020 JUN 28 PM 3:59

Ant Carr

JUN 15 2020

1 ALBRITTON

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** KING WHEEL REPAIR CORP

Name of Corporation

**DOCUMENT NUMBER:** P20000022209

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

Please return all correspondence concerning this matter to the following:

OMAR VALENCIA

Name of Contact Person

Firm/Company

3205 FAIRFIELD DR

Address

KISSIMMEE FL 34743

City/State and Zip Code

VALEOMA2@YAHOO.COM

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

For further information concerning this matter, please call:

Omar Valencia

at ( 954 ) 4792019

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

# ARTICLES OF CORRECTION

For

KING WHEEL REPAIR CORP

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

P0000022209

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

2020 JUN 28 PM 3:59

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 03/09/2020

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

Specify the inaccuracy, incorrect statement, or defect:

THE PRESIDENT ADDRESS HAS A MISSPELLED WORD FOR THE STREET NAME

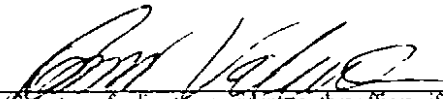
MISSING THE LETTER (I) FARFIELD THE CORRECT NAME IS FAIRFIELD

Correct the inaccuracy, incorrect statement, or defect:

OMAR VALENCIA

3205 FAIRFIELD DR

KISSIMMEE FL 34743



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

OMAR VALENCIA

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

PRESIDENT

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

**Filing Fee: \$35.00**