

P20 0000 26914

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

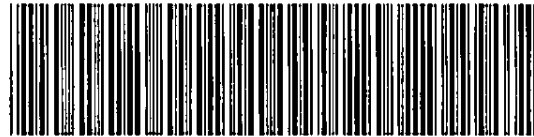
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500344169875

05/11/20--01020--017 **35.00

20 MAY 11 AM 9:42

MAY 29 2023
C McNAIR

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BEACON CONSULTING SERVICES AND INSURANCE INC
Name of Corporation

DOCUMENT NUMBER: P20000026914

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

Please return all correspondence concerning this matter to the following:

CLAUDIA HART

Name of Contact Person

Firm/Company

3646 PINEHURST DRIVE

Address

HOLIDAY, FLORIDA 34691

City/State and Zip Code

CBENTOHART1@GMAIL.COM

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

For further information concerning this matter, please call:

WALACE LANGAME

at (781) 316-4829

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

20 MAY 11 AM 9:42

ARTICLES OF CORRECTION

For

BEACON CONSULTING SERVICES AND INSURANCE INC

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

P20000026914

Document Number (if known)

20 MAY 11 AM 9:42

Pursuant to the provisions of Section 607.0124, Florida Statutes.

These articles of correction correct ARTICLE OF INCORPORATION
(Document Type Being Corrected)

filed with the Department of State on 03/30/2020
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

The documents shows

HARTHUR RUIZ LANGAME 3670 PINEHURST DRIVE HOLIDAY FLORIDA 34691

WALACE D LANGAME TITLE P 3746 PINEHURST DRIVE HOLIDAY FLORIDA 34691

MAILING ADDRESS SHOWS 884 SOUTHERN ARTERY

Correct the inaccuracy, incorrect statement, or defect:

THE FOLLOWING STATEMENT SHOULD BE

PRESIDENT FRANCISCO DE SOUZA SANTIAGO 3746 PINEHURST DRIVE HOLIDAY FLORIDA 34691

DIRECTOR EUSTAQUIO JUNIOR LANGAME 2209 UNION RD CEDAR FALL IA 50613

CORRECT MAILING ADDRESS IT SHOULD BE 3746 PINEHURST DRIVE HOLIDAY MA 34691

Claudia Bento Hart

(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.)

CLAUDIA BENTO HART

(Typed or printed name of person signing)

VICE PRESIDENT

(Title of person signing)

Filing Fee: \$35.00