

PZO COCC 36682

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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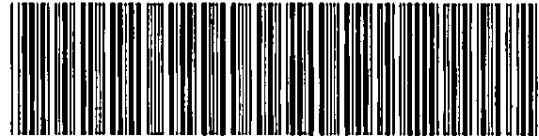
(Business Entity Name)

(Document Number)

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JUN 20 2020  
I ALBRITTON

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: Infinite National Care Corp.  
Name of Corporation

DOCUMENT NUMBER: P20000036682.

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

Please return all correspondence concerning this matter to the following:

Kassandra Barnswell  
Name of Contact Person

Infinite National Care Corp.  
Firm/Company

1222 Belgrave St.  
Address

Fort Myer, FL 33913  
City/State and Zip Code

gjkassandra@hotmail.com  
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Kassandra Barnswell (917) 600-9055  
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

INFINITE NATIONAL CARE CORP.  
Name of Corporation as currently filed with the Florida Dept. of State

P20000036682  
Document Number (if known)

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 May 14, 2020  
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

Article VIII The effective date  
7-1-2020

Correct the inaccuracy, incorrect statement, or defect:

Article VIII The effective date  
be 6-1-2020

  
(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.)

Kassandra Barnswell  
(Typed or printed name of person signing)

VP  
(Title of person signing)

Filing Fee: \$35.00

2020 JUN 14 AM 8:16

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