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JUN 22 2020

Correction

AUG 18 2020

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2020 JUN 22 A 10:05

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## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: MAHANAIN INC  
Name of Corporation

DOCUMENT NUMBER: P20000041285

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

Please return all correspondence concerning this matter to the following:

NELLY CASTILLO

Name of Contact Person

MAHANAIN INC

Firm/Company

275 NW 10 ST APT 308

Address

MIAMI FL 33136

City/State and Zip Code

YANETHCASTILLO234@ICLOUD.COM

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

For further information concerning this matter, please call:

NELLY CASTILLO at (786- 8651660  
Name of Contact Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

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| <input checked="" type="checkbox"/> \$35.00 Filing Fee       | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status                 |
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**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

MAHANAIN INC

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

P20000041285

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

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 06/02/2020  
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

VICE PRESIDENT NAME SHOWS DUBON, ORLANDO

Correct the inaccuracy, incorrect statement, or defect:

DUBON SANCHEZ, JOSE ORLANDO (VICE PRESIDENT)

2020 JUN 22 A 10:05

Nelly Castillo

(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.)

NELLY CASTILLO

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

PRESIDENT

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

**Filing Fee: \$35.00**