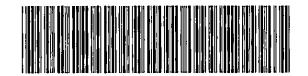
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COVER LETTER

TO: Amendment Section Division of Corporations	•
All Island Tours SUBJECT:	
P200000689	Name of Corporation
DOCUMENT NUMBER: P200000689	
The enclosed Articles of Correction a	nd fee are submitted for filing.
Please return all correspondence conc	erning this matter to the following:
Ingrid Cunningham	
Name of Contact Perso	n
All Island Tours	
Firm/Company	
651 NW 118th Ave	
Address	
Plantation, FL. 33325	
City/State and Zip Co	ode
allislandtours1@gmail.com	
E-mail address: (to be used for future ar	nual report notification)
For further information concerning th	is matter, please call:
Ingrid Cunningham	954 676-4058
Name of Contact Person	at ()
Enclosed is a check for the following	amount:
■ \$35.00 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status
☐ \$43.75 Filing Fee & Certified Cop	y \$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 81

Tallahassee, FL 32303

ARTICLES OF CORRECTION

For

بيج

All Island Tours
Name of Corporation as currently filed with the Florida Dept. of State
P20000068937
P20000068937 Document Number (if known)
Pursuant to the provisions of Section 607.0124, Florida Statutes.
These articles of correction correct articles of corporation (Openment Type Being Corporate).
(Document Type Being Corrected)
iled with the Department of State on (File Date of Document)
Specify the inaccuracy, incorrect statement, or defect: President of corporation should read — Ingrid Cunningham
Freasurer should read Ingrid Cunningham
remove Hugh Cunningham from the document
Correct the inaccuracy, incorrect statement, or defect:
/
(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.)
1 1
ngrid Cunningham
(Typed or printed name of person signing) (Title of person signing)
Filing Fee: \$35.00

Filing Fee: \$35.00