P210000 25768

(Requestor's Name)		
(Address)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
,		
(Decument Number)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		





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07/23/21--01008--006 **35.00

COVER LETTER

TO: Amendment Section Division of Corporations

TRUE LUVZ, INC. SUBJECT:		
	lame of Corporation	
DOCUMENT NUMBER: P21000025768		
The enclosed Articles of Correction and fe	e are submitted	for filing.
Please return all correspondence concernir	ng this matter to	the following:
Michael Stapleton		
Name of Contact Person		_
TRUE LUVZ, INC.		
Firm/Company		_
1523 Flournoy Cir W., #10302		
Address		_
Clearwater, FL 33764		
City/State and Zip Code		_
mike.stapleton@kloudaroo.com		
E-mail address: (to be used for future annual re	port notification)	
For further information concerning this ma	atter, please call:	
Michael Stapleton	727 at (642-3977
Name of Contact Person	Area Code	Daytime Telephone Number
Enclosed is a check for the following amou	unt:	
■ \$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

TRUE LUVZ, INC.	
Name of Corporation as currently filed wit	h the Florida Dept. of State
P21000025768	
Document Number (if	known)
	·····
Pursuant to the provisions of Section 607.0124. Florida	Statutes.
These articles of correction correct ARTICLES OF INCO	RPORATION
These arricles of correction correct	Document Type Being Corrected)
filed with the Department of State on 03/15/2021	
(File Da	e of Document)
Specify the inaccuracy, incorrect statement, or defect:	
WE ARE CHANGING THE NAME OF OUR COMPANY.	
WE ARE ALSO CHANGING THE PRINCIPLE ADDRESS.	
Correct the inaccuracy, incorrect statement, or defect:	
THE NEW NAME IS: MIKE STAPLETON GROUP, INC.	
THE NEW ADDRESS IS: 401 EAST JACKSON STREET,	SUITE 2340, TAMPA, FL 33602
A Signature of a director, president or other office	-allotan
not been selected, by an incorporator - if in the other court appointed fiduciary, by that fiduciary	hands of the receiver, trustee, or
MICHAEL STAPLETON	PRESIDENT
(Typed or printed name of person signing)	(Title of person signing)

Filing Fee: \$35.00