## P21000052322

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(Cit	ty/State/Zip/Phone	#)	
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Tallahassee, FL 32314

SUBJECT: GALAXY GLOBAL DEVELOPERS & FINANCING, INC.				
	Name of Corporation			
DOCUMENT NUMBER:	P21000052322			
The enclosed Articles of Correction and	fee are submitted for filing.			
Please return all correspondence concern	ing this matter to the following:			
BUSINESS OFFICE				
Name of Contact Person				
GALAXY GLOBAL DEVELOPERS & FINAN	CING. INC.			
Firm <sup>2</sup> Company				
6750 N. ANDREWS AVENUE, SUITE 200				
Address				
FORT LAUDERDALE, FL 33309				
City/State and Zip Code	<del></del>			
GLOBALVGALAXY@GMAIL.COM				
E-mail address: (to be used for future annual	report notification)			
For further information concerning this r	natter, please call:			
PATERICA H. THOMAS	at () 804-7659  Area Code Daytime Telephone Number			
Name of Contact Person	at () Area Code Daytime Telephone Number			
Enclosed is a check for the following am	iount:			
□ \$35.00 Filing Fee	□ \$43.75 Filing Fee & Certificate of Status			
<del>-</del>	_			
■ \$43.75 Filing Fee & Certified Copy	☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy			
Mailing Address:	Street Address:			
Amendment Section	Amendment Section			
Division of Corporations	Division of Corporations			
P.O. Box 6327	The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF CORRECTION

For

GALAXY GLOBAL DEVELOPERS & FINANCING, INC.		
Name of Corporation as currently filed with the Florida Dept. of State		
P21000052322		
Document Number (if known)		
Pursuant to the provisions of Section 607.0124, Florida Statutes.		
These articles of correction correctARTICLES OF INCORPORATION		
(Document Type Being Corrected  JUNE 3, 2021	)	
filed with the Department of State on (File Date of Document)		
Specify the inaccuracy, incorrect statement, or defect:		
Title: ATS - Paterica H. Thomas		
Registered Agent: Tatercia H. Thomas		
Registered rigent. Futered 17. Finalias		<del></del>
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Correct the inaccuracy, incorrect statement, or defect:		
Title: P - Paterica H. Thomas	STATE 2:0	_
	<u></u>	· <u>:</u>
Registered Agent: Paterica H. Thomas		<u> </u>
	<u>-</u>	<del></del>
AM. Thank		
(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/ Paterica Thomas	PRESIDENT	<u> </u>
(Typed or printed name of person signing)	(Title of person signing)	

Filing Fee: \$35.00