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## **COVER LETTER**

TO: Amendment Section Division of Corporations

SUBJECT: NAILS BY MARILENA INC			
DOCUMENT NUMBER: P21000064800	Name of Corporation		
The enclosed Articles of Correction and fe	e are submitted	I for filing.	
Please return all correspondence concerni			
CHARMAIN J OMARA		-	
Name of Contact Person		<del></del>	
CREATIVE SERVICES INC			
Firm/Company	<del></del>	<u> </u>	
368 E 860 N			
Address		_	
HURRICANE, UT 84737			
City/State and Zip Code		_	
CREATIVESERVICES2677@GMAIL.COM			
E-mail address, (to be used for future annual r	eport notification)	<u> </u>	
For further information concerning this m	atter, please cal	l:	
CHARMAIN OMARA	435	216-6307	
Name of Contact Person	435 at (	Daytime Telephone Number	
Enclosed is a check for the following amo	ount:		
■ \$35.00 Filing Fee	□ \$43.75 Fi	lling Fee & Certificate of Status	
☐ \$43.75 Filing Fee & Certified Copy	□ \$52.50 F Co	□ \$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

		2
	ARTICLES OF CORRECTION	State
	For	6/0
NAILS BY MARILE	ENA, INC.	4/4
	Name of Corporation as currently filed with the Florida Dept. of	State
	P21000064800	• • •
	Document Number (if known)	<del></del>
Pursuant to the provision	ons of Section 607.0124, Florida Statutes.	
These articles of correc	ction correct ARTICLES OF INCORPORATION	
	Locument Type Bein	g Corrected)
filed with the Departme	tent of State on 07/15/2021 (File Date of Document)	·
	. incorrect statement, or defect:	
	KE MADE BY CREATIVE SERVICES INC WHEN F	FILING THE ARTICLES
OF INCORPORATION F	OR MARILENA DIFABIO. THE CORRECT NAME	FOR THE OWNER SHOULD
BE LISTED AS MARILE	ENA CHIODINI AND NOT MAILENA DIFABIO.	
		· · · · · · · · · · · · · · · · · · ·
Correct the inaccuracy	, incorrect statement, or defect:	
	THE ARTICLES FILED WITH THE STATE OF FLO	RIDA WHERE MARILENA
	AME) WAS USED - PLEASE CHANGE TO THE CO	
NAME OF MARILENA O	CHIODINI	
		· · · · · · · · · · · · · · · · · · ·
		_
	Warilana (hiodini (Difabio 1 Signature of a director, president or other officer - 17 difeotors or offinot been selected, by an incorporator - if in the hands of the receive	icers have

Filing Fee: \$35.00

PRESIDENT

(Title of person signing)

MARILENA CHIODINI (DIFABIO)

(Typed or printed name of person signing)