

P21 0000 82320

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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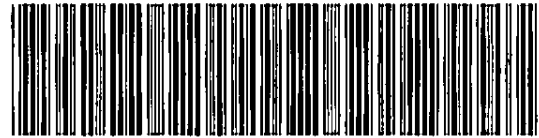
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** THE SERRIC INC

Name of Corporation

**DOCUMENT NUMBER:** P21000082320

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

Please return all correspondence concerning this matter to the following:

RHONDA LONGHORN

Name of Contact Person

LEON P WILDE CPA INC

Firm/Company

969 S FEDERAL HWY #400

Address

STUART, FL 34994

City/State and Zip Code

RHOJO@BELLSOUTH.NET

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

For further information concerning this matter, please call:

RHONDA LONGHORN

Name of Contact Person

at ( )

Area Code

772- 220-7658

Daytime Telephone Number

Enclosed is a check for the following amount:

\$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

THE SERRIC INC

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

P21000082320

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 09/17/2021 (File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

THE REGISTERED AGENT AND PRESIDENT NAME ARE INCORRECT CURRENTLY IS PHILLIP M SERRICHO

Correct the inaccuracy, incorrect statement, or defect:

SHOULD ONLY BE ONE "L" IN FIRST NAME AND SHOULD BE A JR AT THE END SHOULD BE PHILIP M SERRICHO JR

FILED 2021 OCT -4 PM 2:41 DEPT OF STATE TALLAHASSEE, FL

[Handwritten Signature] (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.)

PHILIP M SERRICHO JR (Typed or printed name of person signing)

PRESIDENT (Title of person signing)

Filing Fee: \$35.00