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(Re	questor's Name)		
(Address)			
(Ad	ldress)		
(Cit	ty/State/Zip/Phor	ne #)	
PICK-UP	MAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificate	es of Status	
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COVER LETTER

TO: Amendment Section Division of Corporations	•			
SUBJECT: Super Electric Nan DOCUMENT NUMBER: PD 000	in or corporation			
The enclosed Articles of Correction and fee are submitted for filing.				
Please return all correspondence concerning	this matter to the following:			
James E Baltusk	onis			
Super Electric Screen	nins Inc			
11760 Wiles Road	Suite 5			
Coral Springs FL City/Supre and Zip Code	33076			
JBaltuskonis @ A E-mail address: (to be used for future annual repo	OL, Comport notification)			
For further information concerning this matter, please call:				
James (Jin) Baltustanis	at (954) 445-5897 Area Code Daytime Telephone Number			
Enclosed is a check for the following amount	nt:			
\$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

Sugar Flortin	STEEN INS JAC. praction as currently filed with the Florida Dept. of	DZZFEB 15 AMTH: 0.
Name of Corpo	pration as currently filed with the Florida Dept. of	State . Tr
P2	Document Number (if known)	
Pursuant to the provisions of Section These articles of correction correct	607.0124, Florida Statutes.	of Incorporation
filed with the Department of State on	(File Date of Document)	
Specify the inaccuracy, incorrect state		
Conpany Name:	Super Electric	Screenins, Inc.
Correct the inaccuracy, incorrect state	ement, or defect: ~ Electric Scree	ning, Inc
		
not been selected,	cetor, president or other officer - if directors or off by an incorporator - if in the hands of the received need fiduciary, by that fiduciary.)	ficers have r, Irustee, or
James Balfustonis (Typed or printed name of person sa	gning)	Resident (Title of person signing)

Filing Fee: \$35.00