

P220000027001

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

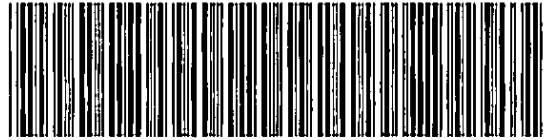
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800386454068

04/25/22--01024--033 **60.00

2022 APR 25 PM 3:35
Filing Office
TAL...
JFL

cf 6/22/2022

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: 2 LEAFS, Inc.
Name of Corporation

DOCUMENT NUMBER: P22000027001

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

Please return all correspondence concerning this matter to the following:

Kristen M. Jackson

Name of Contact Person

Jackson Law PA

Firm/Company

5401 S Kirkman Rd, Ste 310

Address

Orlando FL 32819

City/State and Zip Code

Renato

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

For further information concerning this matter, please call:

Kristen M. Jackson

at (407) 363-9020

Name of Contact Person

Area Code

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

2 LEAFS, Inc.

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

P22000027001

Document Number (if known)

2022 APR 25 PM 3:35

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 March 28, 2022
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

The principal place of business address and registered agent address is specified as: 1615 Woodward Street, Orlando

FL 32803

Correct the inaccuracy, incorrect statement, or defect:

The principal place of business and the registered agent address should be: 8744 Lost Cove Drive, Orlando, FL 32819



(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.)

Kristen M. Jackson

(Typed or printed name of person signing)

Incorporator

(Title of person signing)