

P22 000049447

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

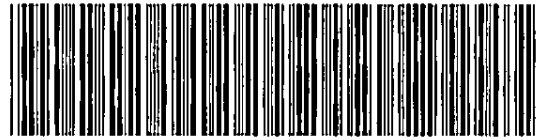
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FILED
2023 MAY -1 AM 7:11
TAMM HALL
STATE

5/18/2023

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: ALL DENTS REMOVED, INC

Name of Corporation

DOCUMENT NUMBER: P22000049447

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

Please return all correspondence concerning this matter to the following:

MCLENDON, JAMES D

Name of Contact Person

ALL DENTS REMOVED, INC

Firm/Company

1574 W BREEZY LN

Address

WEST PALM BEACH, FL 33417

City/State and Zip Code

mtgsuem@gmail.com

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

For further information concerning this matter, please call:

JAMES MCLENDON

Name of Contact Person

at (561) 541-3980

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 28, 2023

JAMES D MCLENDON
1574 W BREEZY LANE
WEST PALM BEACH, FL 33417

SUBJECT: ALL DENTS REMOVED, INC
Ref. Number: P22000049447

We have received your document for ALL DENTS REMOVED, INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please specify the inaccuracy name in your document.

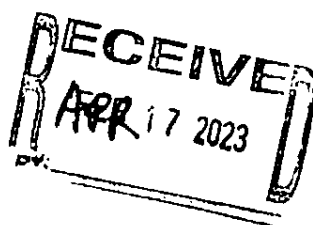
The document must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers listed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden
Regulatory Specialist II

Letter Number: 723A00002120



ARTICLES OF CORRECTION

For

ALL DENTS REMOVED, INC

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

P22000049447

Document Number (if known)

2023 MAY -1 AM 7:11

STATE
TALLAHASSEE, FL

Pursuant to the provisions of Section 607.0124, Florida Statutes.

These articles of correction correct P22000049447 ARTICLES OF INCORPORATION
(Document Type Being Corrected)

filed with the Department of State on 06-16-2022
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

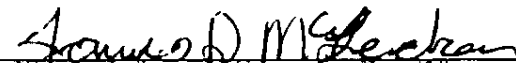
PRESIDENT FIRST NAME:

CORRECT: JAMES D MCLENDON

INCORRECT: JAME D MCLENDON

Correct the inaccuracy, incorrect statement, or defect:

CORRECT: JAMES D MCLENDON



(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.)

JAMES MCLENDON

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35.00