## P22000060788

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1 11/2a/2022

## **COVER LETTER**

TO: Amendment Section **Division of Corporations** 

ARMOR LOGISTICS INC

Name of Corporation

DOCUMENT NUMBER:\_ P22000060788

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

Please return all correspondence concerning this matter to the following:

JEROME PRIME

Name of Contact Person

JEROME PRIME INC

Firm/Company

1201 S COLLINS ST #2

Address

PLANT CITY FLORIDA 33563

City/State and Zip Code

cbpenter@hotmail.com

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

For further information concerning this matter, please call:

at (<u>813</u>)<u>925-9169</u> Area Code <u>Daviim</u> jerome prime Daytime Telephone Number Name of Contact Person

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

Certified Copy

□ \$52.50 Filing Fee, Certificate of Status &

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**

## FILED

For

2022 AUG -8 AM 7: 54

SECRETARY OF STATE TALLAHASSEE, FL

ARMOR LOGISTICS INC

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

P22000060788

Document Number (if known)

Pursuant to the provisions of Section 607.0124. Florida Statutes.

These articles of correction correct <u>ELECTRONIC ARTICLES OF INCORPORATION</u>

(Document Type Being Corrected)

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filed with the Department of State on \_\_\_\_\_ (File Date of Document)

Specify the inaccuracy, incorrect statement, or defect: SPELLING OF name ARMOR in company name.

Correct the inaccuracy, incorrect statement, or defect: ARMOUR

(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 )

LANORA LOVETT-FLUELLEN

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(Typed or printed name of person signing)

(Title of person signing)

Filing Fee: \$35.00