P2300004817

| (Requestor's Name) | | | |
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| PICK-UP WAIT MAIL | | | |
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| Certified Copies Certificates of Status | | | |
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⁴ TO: Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

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| SUBJECT: | | | | |
|---|--|---|-------------------------------------|---|
| DOCUMENT NUMBER: P23000004817 | me of Corporation | | | |
| | | | | |
| The enclosed Articles of Correction and fee | are submitted 1 | or filing. | | |
| Please return all correspondence concerning | this matter to t | he following: | | |
| MARIANA DEL CARMEN FERREIRA PRIETO | | | | |
| Name of Contact Person | | - | | |
| MCFP INC | | | | |
| Firm/Company | _ | | | |
| 5220 NE 2ND CT APT #4 | | | | |
| Address | | _ | | |
| MIAMI, FL, 33137 | | | 202 SEG ED | |
| City/State and Zip Code | | _ | 3FE | |
| OFFICE@BEHARCPA.COM | | | 2023 FEB 15 SECRETAR) TALLAHA | SALLENS SALLEN |
| E-mail address: (to be used for future annual repo | ort notification) | _ | - 연구 <u></u> | |
| For further information concerning this mat | ter, please call: | | AM IO: O | |
| MARIANA DEL CARMEN FERREIRA PRIETO | 832 _ at (| 231-6959 | ं हि | |
| Name of Contact Person | Area Code | Daytime Teleph | one Number | |
| Enclosed is a check for the following amount | nt: | | | |
| ■ \$35.00 Filing Fee | ☐ \$43.75 Filing Fee & Certificate of Status | | | |
| ☐ S43.75 Filing Fee & Certified Copy | ☐ \$52.50 Filing Fee. Certificate of Status & Certified Copy | | | |
| Mailing Address: Amendment Section Division of Corporations | | Street Address: Amendment Sec Division of Cor | ction | |

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF CORRECTION

For

| MCFP INC | | | |
|--|---------------------------------|--|--|
| Name of Corporation as currently filed with the Florida Dept. of St | tate | | |
| P23000004817 | | | |
| Document Number (if known) | <u> </u> | | |
| Pursuant to the provisions of Section 607.0124, Florida Statutes. | | | |
| These articles of correction correct Name of director, registered agent & inco | эгрогают | | |
| (Document Type Being o | Corrected) | | |
| filed with the Department of State on O1/13/2023 (File Date of Document) | · | | |
| Specify the inaccuracy, incorrect statement, or defect: | | | |
| THE NAME IS MISSPELLED OF REGISTERED AGENT, INCORPORATOR & | & DIRECTOR. | | |
| REGISTERED AGENT: MARIADELCARMEN FERREIRA PRIETO | | | |
| INCORPORATOR: MARIADELCARMEN FERREIRA PRIETO | 60. | | |
| DIRECTOR: MARIADELCARMEN FERREIRA PRIETO | ZP23 F | | |
| | <u> </u> | | |
| | AC 05 | | |
| | | | |
| Correct the inaccuracy inaccurat statement or defeat. | | | |
| Correct the inaccuracy, incorrect statement, or defect: PLEASE CORRECT NAME OF REGISTERED AGENT, INCORPORATOR & I | ' ~:(C | | |
| | DIRECTOR. | | |
| REGISTERED AGENT: MARIANA DEL CARMEN FERREIRA PRIETO | · | | |
| INCORPORATOR: MARIANA DEL CARMEN FERREIRA PRIETO | | | |
| DIRECTOR: MARIANA DEL CARMEN FERREIRA PRIETO | | | |
| | | | |
| | | | |
| (Signature of a director, president or other officer - if directors or office not been selected, by an incorporator - if in the hands of the receiver, to other court appointed fiduciary, by that fiduciary.) | Field ers have rustee, or | | |
| MARIANA DEL CARMEN FERREIRA PRIETO | DIRECTOR | | |
| (Typed or printed name of person signing) | (Title of person signing) | | |

Filing Fee: \$35.00