# P2300025944

(Requestor's Name)
(Address)
<del></del>
(Address)
(City/State/Zip/Phone #)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer.

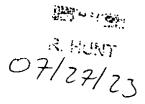
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07/27/23--01015--006 \*\*35.00







## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

A domestic or foreign corporation may correct a document filed by the Department of State if the document contains, an inaccuracy, an incorrect statement, was defectively executed, attested, sealed, verified or acknowledged, or the electronic transmission was defective.

Pursuant to Section 607.0124, Florida Statutes, a document is corrected by preparing **Articles of Correction** that:

Describe the document, including its file date.

Specify the inaccuracy, incorrect statement, or defect.

Correct the inaccuracy, incorrect statement, or defect.

A form for **Articles of Correction** is attached. Additional sheets can be included if necessary. Pursuant to Section 607.0120, Florida Statutes, the document must be typewritten or printed and must be legible.

Filing Fee \$35.00 (Includes a letter of acknowledgment)

Certified Copy (Optional) \$ 8.75 Certificate of Status (Optional) \$ 8.75

Send one check in the total amount made payable to the Florida Department of State.

Please include a letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

#### 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

For further information, you may contact the Amendment Section at (850) 245-6050.

### **COVER LETTER**

**TO:** Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

SUBJECT:			<del>, , , , , , , , , , , , , , , , , , , </del>	<del></del>	
DOCUMENT NUMBER: P23000025944	Name of Corporation				
The enclosed Articles of Correction and fe	ee are submitted	for filing.		<del></del>	
Please return all correspondence concerning	ng this matter to	the following:			
ARSHADULLAII FALAH					
Name of Contact Person	<del></del>	_ <u>_</u>			
BURRITACO FOOD INC					
Firm/Company		_			
2610 N 40TH STREET					
Address		<del>_</del>		2023	
TAMPA, FL 33605				٠.	
City/State and Zip Code	<del> </del>	<del></del>		27	
ARSHAD_FALAH@YAHOO.COM				PM 8: 37	;
E-mail address: (to be used for future annual re	eport notification)		<u>. ம</u> வ	ö	+
For further information concerning this ma	atter, please call	:		37	
ARSHADULLAH FALAH	813 at (	503-7439			
Name of Contact Person	Area Code	Daytime Telepi	hone Number		
Enclosed is a check for the following amo	aipt:				
_	_				
\$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	Street Address: Amendment Section Division of Corporations				
Division of Corporations		Division of Corporations			

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## ARTICLES OF CORRECTION

For

BURRITACO FOOD INC					
Name of Corporation as currently filed with the Florida Dept. o	of State		_		
P23000025944					
Document Number (if known)	<del></del>				
Pursuant to the provisions of Section 607.0124, Florida Statutes.					
These articles of correction correct ARTICLES OF INCORPORATION					
(Executive Lype 17)	ing Corrected)	'			
filed with the Department of State on 04/06/2023	·				
(1 No 15th of 15 continuity					
Specify the inaccuracy, incorrect statement, or defect:					
FEDERAL TAX ID MISSING					
		<u> </u>			
	í.	700 300 4 1			
	Arrigin				
		-1			
	10.50 10.50 10.50	7	<u> </u>		
Correct the inaccuracy, incorrect statement, or defect:	E SIALE		الريقي)		
ADD FEDERAL CORPORATE TAX IDENTIFICATION NUMBER 92-338	2042				
	<u> </u>				
(Signature of a Sangara Control of the Core or o	officers have				
not been selected by an interest of the free of the receive other court appointed fiduciary, by that fiduciary.)	er, trustee, or				
ARSHADULLAH FALAH	PRESIDENT				
(Typed or printed name of person signing)	(Title of perso	(Title of person signing)			

Filing Fee: \$35.00