P23000036091

Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations KENTS33 Inc SUBJECT: Name of Corporation DOCUMENT NUMBER: P23000036091 The enclosed Articles of Correction and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **BRIAN ROMERO** Name of Contact Person KENTS33 LLC Inc Firm/Company 225 NE 23 st suite 1313 Address MIAMIFLA 33137 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JOHNNY SANCHEZ Name of Contact Person 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: **Street Address:**

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF CORRECTION

. . . .

For

KENTS33 LLC. Inc					
Name	of Corporation as currently filed with the Flori	ida Dept. of State			_
P230	00036091				
	Document Number (if known)	· -			
Pursuant to the provisions of Se	ction 607.0124, Florida Statut	es.			
These articles of correction correct.	P23000036091	T		,	
		nt Type Being Corrected)			
filed with the Department of State on O5/06/2023 (File Date of Document)					
Specify the inaccuracy, incorrect	t statement, or defect:				
CANNOT BE LLC and Inc, in name confusing.			144	202	
Line of business not 5 lines, only health & life consultant and sales			22	VH h	
					717 - 777
				2	
			(·:	ب	
				28	
Correct the inaccuracy, incorrec KENTS33, Inc	t statement, or defect:				
SHORT LINE IS ONLY LIFE AT	ND HEALTH				
(Signature not been so other cour	of a director, the steel of other officer - if directed, by an incorporator - if in the hands of appointed fiduciary, by that fiduciary.)	ectors or officers have the receiver, trustee, or	.,		
BRIAN ROMERO		PRES			
(Typed or printed name of person signing)		(Title c	of person sign	ning)	

Filing Fee: \$35.00