P23000055992

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: GTO LABOR INC	
DOCUMENT NUMBER: P23000055992	Name of Corporation
The enclosed Articles of Correction and f	ee are submitted for filing.
Please return all correspondence concerni	-
NANCY PERKINS	S
Name of Contact Person	
PAYROLL SOLUTIONS OF SO FL INC	
Firm/Company	
PO BOX 309	
Address	
LABELLE. FL 33935	
City/State and Zip Code	·
NANCY@PRSLABELLE.COM	
E-mail address: (to be used for future annual r	eport notification)
For further information concerning this in	atter, please call:
NANCY PERKINS	863 612-0073
Name of Contact Person	at () 612-0073 Daytime Telephone Number
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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

For

GTO LABOR INC	· · · · · · · · · · · · · · · · · · ·
Name of Corporation as currently filed with the Florida Dept. of State	(12)
P23000055992	
Document Number (if known)	
Pursuant to the provisions of Section 607.0124, Florida Statutes.	
These articles of correction correct FLORIDA PROFIT CORPORATION (Document Type Being Correction)	, , , , , , , , , , , , , , , , , , ,
filed with the Department of State on 7/31/2023 (File Date of Document)	·
Specify the inaccuracy, incorrect statement, or defect:	
Principal place of business address and mailing address are wrong.	
Correct the inaccuracy, incorrect statement, or defect: Correct principal place of business address and mailing address is:	
632 PALM AVE	
LABELLE, FL 33935	
(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, other court appointed fiduciary, by that fiduciary.)	or
(Typed or printed name of person sheming)	(Title of person signing)

Filing Fee: \$35.00