# P23000070293

(Requestor's Name)	
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(Business Entity Name)	
(business Entity Name)	
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## COVER LETTER

Division of Corporations	
SUBJECT: LIS CARE & TRANSPORTATION   Na	ne of Corporation
DOCUMENT NUMBER: P23000070293	·
The enclosed Articles of Correction and fee	are submitted for filing.
Please return all correspondence concerning	this matter to the following:
LISDANIA COLOME FLAQUER	
Name of Contact Person	<del></del>
LIS CARE & TRANSPORTATION INC	
Firm/Company	****
2268 NE 42ND CIR	
Address	
HOMESTEAD, FL 33033	
City/State and Zrp Code	
lisamor23@gmail.com	
E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this mat	ter, please call:
ISDANIA COLOME FLAQUER	786 370-2761 at ()
Name of Contact Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amoun	nt:
■ \$35.00 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status
☐ \$43.75 Filing Fee & Certified Copy	☐ S52.50 Filing Fee, Certificate of Status & Certified Copy

Mailing Address:
Amendment Section Division of Corporations P.O. Box 6327

## **Street Address:**

Amendment Section Division of Corporations The Centre of Tallahassee

## ARTICLES OF CORRECTION

For

ISDANIA COLOME FLAQUER	23 007 17 14 4: 16
Name of Corporation as currently filed with the F	
P23000070293	rionda Dept. of State
Document Number (1f known	)
Pursuant to the provisions of Section 607.0124, Florida Stat	tutes.
These articles of correction correct Articles of incorporation	
(Decum	nent Type Being Corrected)
filed with the Department of State on October 2, 2023	
(File Date of De	ocument)
Specify the inaccuracy, incorrect statement, or defect:	
Title for Officer Director stated as MGR in the articles of incorportati	ion as
Title MGR	
COLOME FLAQUER, LISDANIA	
2268 NE 42ND CIR	
HOMESTEAD, FL 33033	
should be instead of MGR listed as President	
Correct the inaccuracy, incorrect statement, or defect:  President	
COLOME FLAQUER, LISDANIA	
2268 NE 42ND CIR	
HOMESTEAD, FL 33033	
(Signature of a director, president or other officer - if d not been selected, by an incorporatok - if in the hands other count appointed fuluciary, by that fiduciary.)	firectors or officers have of the receiver, trustee, or
Lindonia Colono Di	
Lisdania Colome Flaquer	President
(Typed or printed name of person signing)	(Title of person signing)

Filing Fee: \$35.00

(Title of person signing)