

P24 00000 5368

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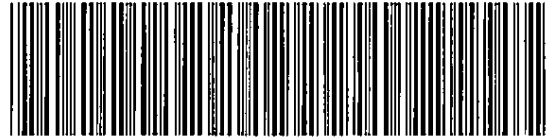
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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Gibbons Law Team, P.A.

Name of Corporation

DOCUMENT NUMBER: P24000005368

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

E. LYNN GIBBONS

Name of Contact Person

GIBBONS LAW TEAM, P.A. D/B/A GIBBONS & GIBBONS

Firm/Company

5500 CENTRAL AVENUE

Address

ST. PETERSBURG, FL 33707

City/State and Zip Code

lynn@gibbonsteam.com

E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

E. Lynn Gibbons

727

633-0000

at (

Name of Contact Person

Area Code

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:

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

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ARTICLES OF CORRECTION

For

GIBBONS LAW TEAM, P.A.

Name of Corporation as currently filed with the Florida Dept. of State

P24000005368

Document Number (if known)

Pursuant to the provisions of Section 607.0124, Florida Statutes.

These articles of correction correct ARTICLES OF INCORPORATION

(Document Type Being Corrected)

filed with the Department of State on 1/18/2024

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

OFFICER/ DIRECTOR DETAIL

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TALLAHASSEE, FL

Correct the inaccuracy, incorrect statement, or defect:

ADD ANOTHER OFFICER: KATELYNN MARA GIBBONS 5500 CENTRAL AVENUE, ST. PETERSBURG, FL

(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, or other court appointed fiduciary, by that fiduciary.)

E. LYNN GIBBONS

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35.00