



*12/11/24*

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

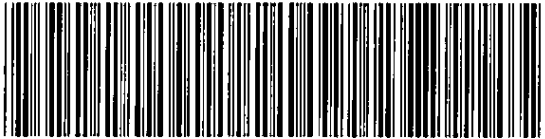
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



700424206987

02/21/24 -01028--010 \*\*35.00

REC'D  
CLERK OF STATE  
TALLAHASSEE, FL  
FEB 21 AM 8:21

INT  
02/11/24

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** PROPERTIES BY L&K INC

Name of Corporation

**DOCUMENT NUMBER:** P24000009024

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

Please return all correspondence concerning this matter to the following:

KEVIN KAPUSCINSKI

Name of Contact Person

Firm/Company

3337 E WET SAND PL

Address

VALE, AZ 85641

City/State and Zip Code

kkapp25@hotmail.com

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

For further information concerning this matter, please call:

KEVIN KAPUSCINSKI

at ( 407 ) 948-2223  
Area Code Daytime Telephone Number

Name of Contact Person

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

SEP 21 AM 8:21  
STATE  
TALLAHASSEE, FL

# ARTICLES OF CORRECTION

For

PROPERTIES BY L&K INC

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

P24000009024

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 FEBRUARY 1, 2024  
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

PRESIDENT - KEVIN KAPUSCINSKI

VICE PRESIDENT & SECRETARY - LALITA KAPUSCINSKI

Correct the inaccuracy, incorrect statement, or defect:

PRESIDENT - LALITA KAPUSCINSKI

VICE PRESIDENT & SECRETARY - KEVIN KAPUSCINSKI

(Signature of a director, president or officer. If none of 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.)

Kevin Kapuscinski  
(Typed or printed name of person signing)

President  
(Title of person signing)

Filing Fee: \$35.00