

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6380

From:

Account Name : MARIA A. MORA  
Account Number : I20200000097  
Phone : (305)206-7926  
Fax Number : (305)675-2631

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**COR AMND/RESTATE/CORRECT OR O/D RESIGN  
YESY'S FASHION BOUTIQUE CORP**

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**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** YESY'S FASHION BOUTIQUE CORP

Name of Corporation

**DOCUMENT NUMBER:** P24000056603

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

Please return all correspondence concerning this matter to the following:

MARIA A MORA

Name of Contact Person

MARIA A MORA SERVICES CORP

Firm/Company

8005 SW 19TH STREET

Address

MIAMI, FL 33155

City/State and Zip Code

cmoramaria@aol.com

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

For further information concerning this matter, please call:

MARIA A MORA

at ( 3054 ) 206-7926

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

**ARTICLES OF CORRECTION**

For

YESY'S FASHION BOUTIQUE CORP

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

P24000056603

Document Number (if known)

Pursuant to the provisions of Section 607.0124, Florida Statutes.

These articles of correction correct OFFICER/ DIRECTOR DETAIL

(Document Type Being Corrected)

filed with the Department of State on 09/03/2024

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

OFFICER NAME

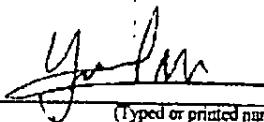
PRESIDENT : YESICA MEDIDAMISTYPED LAST NAME MEDIDA

Correct the inaccuracy, incorrect statement, or defect:

OFFICER NAME

PRESIDENT: YESICA MEDINATHE LAST NAME PREVIOUSLY TYPED ERRONEOUSLY MEDIDA, HOWEVER THE CORRECTLAST NAME IS : M E D I N A

(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.)



(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35.00