

P2500000 5086

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

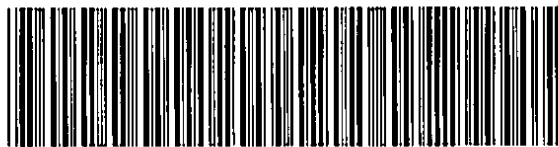
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: VILLA SABOR LATINO, INC

Name of Corporation

DOCUMENT NUMBER: P25000005086

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

Please return all correspondence concerning this matter to the following:

Juan Garcia

Name of Contact Person

SAEG Business Consulting

Firm/Company

101 N Monroe St

Address

Tallahassee, FL 32301

City/State and Zip Code

info@saeg-consulting.com

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

For further information concerning this matter, please call:

Juan Garcia

Name of Contact Person

at (

850

Area Code

407-8061

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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DIVISION OF STATE
CORPORATIONS
TALLAHASSEE, FL

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ARTICLES OF CORRECTION

For

VILLA SABOR LATINO, INC

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

P25000005086

Document Number (if known)

Pursuant to the provisions of Section 607.0124, Florida Statutes.

These articles of correction correct NAME OF CORPORATION,
(Document Type Being Corrected)

filed with the Department of State on 01/21/2025,
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

THE NAME OF THE CORPORATION AS OF TODAY IS VILLA SABOR LATINO, INC

Correct the inaccuracy, incorrect statement, or defect:

WE WOULD LIKE TO CHANGE THE NAME FROM "VILLA SABOR LATINO, INC" TO

"LA VILLA DEL SABOR LATINO INC"

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STATE
TALLAHASSEE, FL

Primo Rico Deigo

(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.)

Primo Rico Deigo

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35.00