

Examiner

IDENTIFICATION

NO. _____

No Fee

The Commonwealth of Massachusetts

William Francis Galvin

Secretary of the Commonwealth

One Ashburton Place, Room 1717, Boston, Massachusetts 02108-1512

CERTIFICATE OF CORRECTION

(General Laws, Chapter 180, Section 3A)

1. Exact name of corporation:

2. Document to be corrected:

3. The above mentioned document was filed with the Secretary of the Commonwealth on

_____, 20_____.

4. Please state the inaccuracy or defect in said document:

5. Please state corrected version of the document:

Note: This correction should be signed by the person(s) required by law to sign the original document.

SIGNED UNDER THE PENALTIES OF PERJURY, this _____ day of _____, 20 _____,

_____, *President / *Vice President,

_____, *Clerk / *Assistant Clerk / *Incorporator(s).

**Delete the inapplicable words.*

Note: If the inaccuracy or defect to be corrected is not apparent on the face of the document, minutes of the meeting substantiating the error must be filed with the certificate. Additional information may be provided on separate 8 1/2 x 11 sheets of white paper with a left margin of at least 1 inch.

P.C.