

P10000022994

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

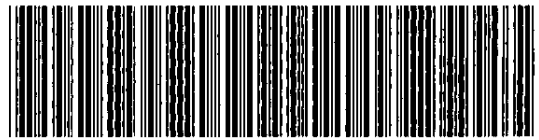
(Document Number)

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APPROVED
AND
FILED
10 APR 19 PM 2:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RC
4/19/10
72

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Grand Oaks Clinic, Inc.
Name of Corporation

DOCUMENT NUMBER: P10000022994

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

Please return all correspondence concerning this matter to the following:

Glen Gunderson DC.
Name of Contact Person

Grand Oaks Clinic, Inc.
Firm/Company

26314 State Rd 54 (Wesley Chapel Blvd)
Address

Lutz, FL 33559-7208
City/State and Zip Code

Katgun@live.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kathy Gunderson (813) 464-5454
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | |
|--|---|
| <input checked="" type="checkbox"/> \$35.00 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status |
| <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 14, 2010

GLEN GUNDERSON DC
26314 SR 54
WESLEY CHAPEL BLVD
LUTZ, FL 33559-7208

SUBJECT: GRAND OAKS CLINIC, INC.
Ref. Number: P10000022994

We have received your document for GRAND OAKS CLINIC, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6957.

Tracy L Lemieux
Regulatory Specialist II

Letter Number: 810A00009249

ARTICLES OF CORRECTION

for

Grand Oaks Clinic, Inc.

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

P10000022994

Document Number (if known)

10 APR 19 PM 2:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation files these Articles of Correction within 30 days of the file date of the document being corrected.

These articles of correction correct P10000022994 / Articles of incorporation

(Document Type Being Corrected)

filed with the Department of State on March 16, 2010.

(File Date of Document)

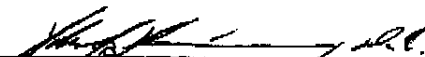
Specify the inaccuracy, incorrect statement, or defect:

Article V Initial Officer
Shawn Simpson D.O.

Registered Agent
Glen Gunderson DC.

Correct the inaccuracy, incorrect statement, or defect:

- A) Article V Initial Officer/Director
Glen Gunderson DC.
- B) V.P. Kathy Gunderson
- C) Registered Agent
Charlie Kelly


(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.)

Glen A. Gunderson, D. O. E.
(Typed or printed name of person signing)

owner/president
(Title of person signing)

Filing Fee: \$35.00

I Charlie Kelly am familiar with and accept the duties and responsibilities as registered agent for Grand Oaks Clinic, Inc.

Sincerely,

A handwritten signature in cursive script that reads "Charlie Kelly". The signature is written in black ink and is positioned below the word "Sincerely,".

Charlie Kelly