

LOS 000053913  
FILED

2005 JUN 20 A 9:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

(Requestor's Name)

9728 Wyland CT

Windermere, FL 34786

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

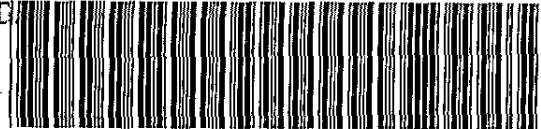
(Document Number)

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

Special Instructions to Filing Officer:

AL

Office Use Only



600056289996

06/20/05--01014--010 \*\*25.00

**ARTICLES OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

**FILED**

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 <sup>9: 46</sup> business days to correct the attached articles of organization or application to transact business in Florida.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FIRST:** The name of the limited liability company is:

Metro Orthopedic Specialists, P.L.

**SECOND:** The articles of organization or the application to transact business

**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)**

☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

- ① The name has LLC after it where PL is needed.
- ② The address should state "Suite 202" instead of "201"
- ③ Under Limited Liability purpose "Any lawful purpose" was previously checked. It needs to be changed to check beside "Professional Limited Liability Company" and OR specific purpose being: Medical office.

☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction is as follows:

Dated: \_\_\_\_\_

Peter J. Godleski, M.D.

Signature of a member or authorized representative of a member

Peter J. GODLESKI, M.D.

Typed or printed name of signee

Filing Fee: \$25.00  
Certified Copy: \$30.00 (optional)