L14000137480

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

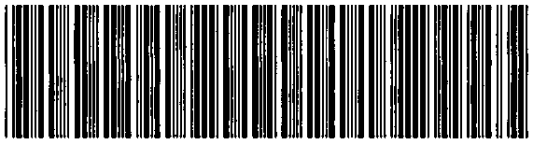
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600267565066

12/18/14--01011--002 **25.00

FILED
2014 DEC 18 PM 1:20
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DEC 23 2014
J. BRUCE

ZACHARY L. BAYNE
DAVID D. FERRENTINO ♦
MATTHEW J. FOSTER ⊥
AARON J. GOLD
MICHELLE G. HUTT
JAMIE A. KLAPHOLZ
JONATHAN E. LEWERENZ
TABATHA A. LIEBERT
DONNA L. LONGHOUSE ⊥
MARIAN P. McCULLOCH †
CYNTHIA A. MIKOS ♦♦
ROBERT A. MORA
GREGORY A. RICHARDS, JR. ⊥
JENNIFER L. SIMPSON-OLIVER
AMY D. SINGER
ANNA G. SMALL
JOCELYN C. SMITH
DONALD W. STANLEY, JR.
PATRICK A. TRABER
GARY WALKER

ALLEN DELL
ATTORNEYS AT LAW

202 S. ROME AVENUE
SUITE 100
TAMPA, FLORIDA 33606

Telephone (813) 223-5351
Main Facsimile (813) 229-6682
Family Law Facsimile (813) 769-3954

ESTABLISHED 1925

† BOARD CERTIFIED, MARITAL & FAMILY LAW
♦♦ BOARD CERTIFIED, HEALTH LAW
♦ BOARD CERTIFIED, BUSINESS LITIGATION
⊥ LL.M., TAXATION

A PROFESSIONAL ASSOCIATION

OF COUNSEL:
YVETTE F. RHODES, P.A.

WRITER'S EMAIL:
cmikos@allendell.com

November 3, 2014

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Optimal Patient Care of the Nature Coast, LLC
Document No. L140000127480

FILED
2014 DEC 18 PM 1:28
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Dear Sir or Madam:

The enclosed Statement of Correction and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

Cynthia A. Mikos, Esq.
Allen Dell, P.A.
202 S. Rome Ave., Ste. 100
Tampa, FL 33606-1854

For future annual report notification, the e-mail address to be used will be: bebotbona@gmail.com.

Enclosed is a check for the $25.00 filing fee. If you request additional information please contact me at (813) 223-5351.

Very truly yours,

ALLEN DELL, P.A.

Cynthia A. Mikos

CAM:bjw
Enc.
cc: Rafael Bona
J:\CMikos\O\Optimal Pt Care Cover ltr w Stmt of Correction 11-03-14.docx

STATEMENT OF CORRECTION
TO THE ARTICLES OF ORGANIZATION OF
OPTIMAL PATIENT CARE OF THE NATURE COAST, LLC

Pursuant to section 605.0209, F.S., this document is being submitted to correct the Articles of Organization for Optimal Patient Care of the Nature Coast, LLC, whose Florida Document number is L14000127480.

The Articles of Organization filed on August 13, 2014 contains some incorrect statements, as follows:

Article II The Principal Address of the entity is shown as:

4329 E. 7th Ave., Ste. 101, Tampa, FL 33605

Correction: **4319** E. 7th Ave., Ste. 101, Tampa, FL 33605

Authorized Representative

Date: 12/15/14

FILED
2014 DEC 18 PM 1:20
SECRETARY OF STATE
TALLAHASSEE FLORIDA