

W11000010995

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Orange City Medical Center Condominium, Inc.

Name of Corporation

DOCUMENT NUMBER: N11000010995

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

Please return all correspondence concerning this matter to the following:

Nishad Khan, Esq.

Name of Contact Person

Nishad Khan, P.L.

Firm/Company

907 Outer Road, Ste B

Address

Orlando, FL 32814

City/State and Zip Code

queniam@nishadkhanlaw.com

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

For further information concerning this matter, please call:

Quenia Herrera

Name of Contact Person

at (407) 228-9711

Area Code & 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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF CORRECTION

for

Orange City Medical Center Condominium, Inc.

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

N11000010995

Document Number (if known)

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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 Articles of Incorporation

(Document Type Being Corrected)

filed with the Department of State on 11/29/2011

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

The word "Association" was inadvertently dropped from the name of the entity

during electronic submission of the Articles of Incorporation.

Correct the inaccuracy, incorrect statement, or defect:

Name of entity should be "Orange City Medical Center Condominium Association, Inc."



(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.)

Nishad Khan, Esq.

(Typed or printed name of person signing)

Attorney

(Title of person signing)

Filing Fee: \$35.00