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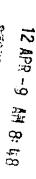
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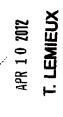
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Venice Holistic Center	ne of Corporation	
DOCUMENT NUMBER: N120000027	08	
The enclosed Articles of Correction and fee	are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
Jillaurie Crane Name of Contact Person		
Venice Holistic Center Firm/Company		
251 Tamiami Tr		
Venice Fl 34285 City/State and Zip Code		
veniceholistic@aol.com E-mail address: (to be used for future annual repo	ort notification)	
For further information concerning this matter	ter, please call:	
Jillaurie Crane Name of Contact Person	at (941) 323 8033 Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount	nt:	
\$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

Venice Holistic Center, Toc Name of Corporation as currently filed with the Florida Dept. of State
Name of Corporation as currently filed with the Florida Dept. of State N 200002708
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 <u>articles of incorporation</u> (Document Type Being Corrected)
filed with the Department of State on march 9 2012 (File Date of Document)
Specify the inaccuracy, incorrect statement, or defect:
Have been informed of better way to describe officers and also one person had to
resign due to illness
· · · · · · · · · · · · · · · · · · ·
Correct the inaccuracy, incorrect statement, or defect:
Board of Directors should have Jillaurie Crane as Managing Director
Joelle Lau-Hansen as Director/Coordinator
Jami Lin as At Large Director
please delete Barbara Calabrese
(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.)
(Typed or printed name of person signing) (Title of person signing)

Filing Fee: \$35.00