

N12000003119

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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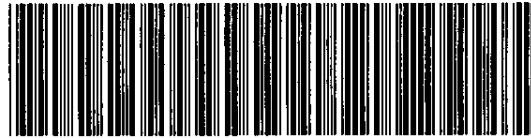
(Business Entity Name)

(Document Number)

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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** The J.O.Y of Life Enrichment Program

Name of Corporation

**DOCUMENT NUMBER:** N12000003119

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

Please return all correspondence concerning this matter to the following:

Tafwani Corley

Name of Contact Person

The J.O.Y of Life Enrichment Program, Inc.

Firm/Company

PO Box 22623

Address

Fort Lauderdale, FL 33335

City/State and Zip Code

cthejoyoflife@gmail.com

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

For further information concerning this matter, please call:

Tafwani Corley

Name of Contact Person

at ( 954 ) 439-1645

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

The J.O.Y of Life Enrichment Program, Inc.

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

N12000003119

Document Number (if known)

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 Original Articles of Incorporation

(Document Type Being Corrected)

filed with the Department of State on 03/22/2012

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

Principal Street Address:

405 S Riverside Drive

Pompano Beach, FL 33062

Director: Julian A Cameron, M.D. - Founder/President

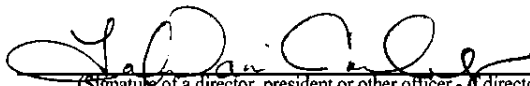
Correct the inaccuracy, incorrect statement, or defect:

Principal Street Address:

1251 SW 112th

Pembroke Pines, FL 33025

Director: Julian A Cameron, M.D. - President



(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.)

Tafwani Corley

(Typed or printed name of person signing)

Incorporator

(Title of person signing)

**Filing Fee: \$35.00**

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