## 13000006379

(Re	questor's Name)	<del></del>
(Ad	dress)	
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(Cit	y/State/Zip/Phone #	)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Name)	<u></u>
(Do	cument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
(Do	ocument Number) Certificates of	

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13 AUG - 1 PM 3: 04

SECRETARY OF STATE DIVISION OF CORPORATION

Requester's Name Rennington Law Firv Address  222-3533  City/State/Zip Phone #	m
	Office Use Only
CORPORATION NAME(S) & DOCUME	NT NUMBER(S), (if known):
1. A Healthy Harida L (Corporation Name)	Lluc. N 1305000 6379
2. (Corporation Name)	(Document #)
(	
3. (Corporation Name)	(Document #)
4. (Corporation Name)	(Document #)
☐ Walk in ☐ Pick up time	Certified Copy
☐ Mail out ☐ Will wait	Photocopy Certificate of Status
NEW FILINGS	AMENDMENTS
Profit	Amendment  Resignation of R.A., Officer/Director
Not for Profit Limited Liability	Change of Registered Agent
<ul><li>Domestication</li><li>Other</li></ul>	Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION
Annual Report	Foreign
Fictitious Name	Limited Partnership Reinstatement
	Trademark Other
	- One
CR2E031(7/97)	Examiner's Initials

## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: A Healthy Florida	a, Inc.	
DOCUMENT NUMBER: N13000006	•	
The enclosed Articles of Correction and fe	e are submitted for filing.	
Please return all correspondence concerning	g this matter to the following:	
E. Murray Moore, Jr.		
Pennington, P.A.  Firm/Company	·····	
215 S. Monroe St., 2nd	Floor	
Tallahassee, FL 32301	<u>.</u>	
City/State and Zip Code  murray@penningtonlav  E-mail address: (to be used for future annual re	port notification)	
For further information concerning this ma		
Murray Moore Name of Contact Person	at (850) 222-3533  Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount	unt:	
□ \$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	



July 25, 2013

PENNINGTON LAW FIRM SHANNON LINDSEY TALLAHASSEE, FL

SUBJECT: A HEALTHY FLORIDA, INC.

Ref. Number: N13000006379

We have received your document for A HEALTHY FLORIDA, INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is no provision in Chapter 617, Florida Statutes, for an incorporator to amend a non profit corporation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 213A00018068

Teresa Brown Regulatory Specialist II

www.sunbiz.org

## ARTICLES OF CORRECTION

13 AUG - PM 3:04

For

A Healthy Florida, Inc	Α	He	aith	/FI	orida	a. Ind	<u>`</u> .
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Name of Corporation as currently filed with the Florida Dept. of State

N1300006379  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 Articles of Incorporation (Document Type Being Corrected)
filed with the Department of State on July 17, 2013  (File Date of Document)
Specify the inaccuracy, incorrect statement, or defect:
The name of the corporation was incorrect.
The principal office and mailing addresses were incorrect.
Correct the inaccuracy, incorrect statement, or defect:
The name of the corporation is:
A Healthy Florida Works Coalition, Inc.
Both the Principal office address and mailing address are:
221 N.E. Ivanhoe Blvd., Suite 200
Orlando, Florida 32804
(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 fiduciarly, by that fiduciarly)
E. Murray Moore, Jr. Incorporator  (Typed or printed name of person signing)  (Typed or printed name of person signing)

Filing Fee: \$35.00