

P03 0000 20530

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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☐ WAIT

☐ MAIL

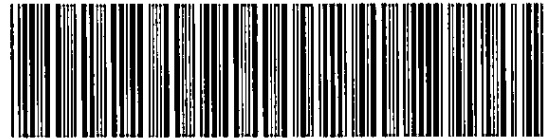
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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COVER LETTER

6/2/21

TO: Amendment Section  
Division of Corporations

SUBJECT: WINDMILL CHIROPRACTIC, P.A.  
Name of Corporation

DOCUMENT NUMBER: PO3000020530

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

Please return all correspondence concerning this matter to the following:

RICK JASON BEHAR

Name of Contact Person

WINDMILL CHIROPRACTIC, P.A.

Firm/Company

17160 ROYAL PALM BLVD, SUITE 1, WESTON, FL 33326

Address

WESTON, FL 33326

City/State and Zip Code

BEHARRICK @ GMAIL.COM

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

For further information concerning this matter, please call:

RICK JASON BEHAR

Name of Contact Person

at ( 954 ) 650-6049

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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

# ARTICLES OF CORRECTION

For

WINDMILL CHIROPRACTIC, P.A.

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

P03000020530

Document Number (if known)

Pursuant to the provisions of Section 607.0124, Florida Statutes.

These articles of correction correct P03000020530  
(Document Type Being Corrected)

filed with the Department of State on 2/07/21  
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

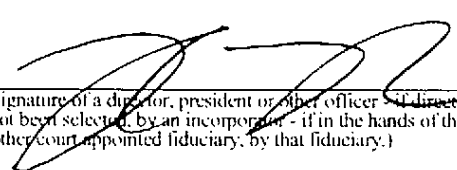
\* Change name of current Registered Agent

\* Change name of officer Detail - P

Correct the inaccuracy, incorrect statement, or defect:

Change name of current Registered Agent  
From: Rick J. BEHAR To: Rick Jason BEHAR

Change name of current officer Detail:  
From: Rick BEHAR To: Rick Jason BEHAR

  
(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.)

RICK BEHAR

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35.00