P050000 85402

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SECRETARY OF STATE DIVISION OF CORPORATIONS

06/24/05--01014--019 **35.00

Art. of Correction
06/27los

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: APEX Chicago (Name of Corpor		
DOCUMENT NUMBER: PO5000	85902	
The enclosed Articles of Correction and fee are submitted for filing.		
Please return all correspondence concerning this man	tter to the following:	
John Ball (Name of Pers	lantyne	
Ballantyne	Accounting	
903 N. Pine	Hills Rd	
Orlando F (City/State and Zi	L 32808	
For further information concerning this matter, please call:		
John Ballantyne at (407) 298-0122 (Name of Person) (Area Code & Daylime 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, Florida 32314	Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399	

ARTICLES OF CORRECTION

for

APEX Chiropractic Clinic, INC. Name of Corporation as currently filed with the Florida Dept. of State
P05000085402 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 Article Tof Articles of Tacor poration files these Articles of Correction correct Articles of Tacor poration files these Articles of Tacor poration files these Articles of Correction correct Articles of Tacor poration files these Articles of Correction correct Articles of Tacor poration files these Articles of Correction within 30 days of the file date of the document being corrected. These Articles of Correction correct Articles of Tacor poration files these Articles of Correction within 30 days of the file date of the document being corrected.
Specify the inaccuracy incorrect statement, or defect: Article II Principal place of business
5304 Silver Star Rd OCOEE, FI 32808
Article I RUBENS BRUN-5304 Silver Star Rd. 3 SER Ocoee) FL 32808 SER Correct the inaccuracy, incorrect statement, or defect:
5304 Silver Star RD = 3000 Orlando, FL 32808 9
Register-RUBENS BRUN-2103 CASSING-HAM CIRCLE OCOEE, FL 34761
(Signature of a director, president of 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.)
Rubens Brun (Typed or printed name of person signing) President (Title of person signing)
Filing Fee: \$35.00 N/C