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(Re	questor's Name)	
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(Cit	y/State/Zip/Phon	e #)
		
PICK-UP	☐ WAIT	MAIL
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(Do	cument Number))
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Articles of Correction

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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Hearing Care Ce	nter of Land O' Lakes, Inc.
DOCUMENT NUMBER: P05000	118273
The enclosed Articles of Correction and fee	e are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
Susan E. Garnic-Newhal (Name of Contact Person)	
Hearing Care Center of (Firm/Company)	Land O' Lakes, Inc.
4710 Land O' Lakes Blv	d. Ste 10
Land O' Lakes, FL 3463 (City/State and Zip Code)	39
For further information concerning this mat	tter, please call:
Susan E. Garnic-Newhall (Name of Contact Person)	_ at (813) 996-2729 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amou	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

FIL	ED
OS SEP 19	PH 4: 10
TALLAHASSEE,	STATE
7, (LORIDA

Hearing Care Center of Land O' Lakes, Inc. Name of Corporation as currently filed with the Florida Dept. of State

P05000118273
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 for Hearing Care Center of Land O' Lakes, Inc.
(Document Type Being Corrected)
filed with the Department of State on August 24, 2005 (File Date of Document)
Specify the inaccuracy, incorrect statement, or defect:
In Article VIII the effective date is incorrectly stated as 10/03/2005
Correct the inaccuracy, incorrect statement, or defect: There shall be no effective date.
There shall be no enective date.
(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.)

Susan E. Garnic-Newhall
(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35.00