

POS000165498

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(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Art. of Con.

C. Coullente JAN 18 2006

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: DEBBIE LYNN HOSKINS, D.M.D., P.A.
(Name of Corporation)

DOCUMENT NUMBER: P 05000165498

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

Please return all correspondence concerning this matter to the following:

F.B. Estergren, P.A.
(Name of Person)

F.B. Estergren, P.A.
(Name of Firm/Company)

P.O. Drawer 2167
(Address)

Ft. Walton Beach, FL 32549
(City/State and Zip Code)

For further information concerning this matter, please call:

F.B. Estergren at (850) 830 4268
(Name of Person) (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, Florida 32314

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

ARTICLES OF CORRECTION

for

DEBBIE LYNN HOSKINS, D.M.D., P.A.

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

P05000165498

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 Electronic Articles of Incorporation

(Document Type)

filed with the Department of State on Dec. 21, 2005

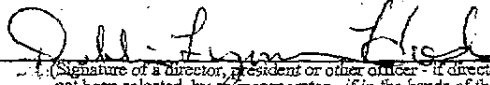
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

The mailing zip code in the addresses in Articles II, V, and VII
incorrectly state the zip code as : 32691

Correct the inaccuracy, incorrect statement, or defect:

The mailing zip code in the addresses in Articles II, V and VII
should read: 32696


(Signature of a director, president or other officer - if directors or officers have not been selected, by the incorporator - if in the hands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.)

Debbie Lynn Hoskins
(Typed or printed name of person signing)

Pres.
(Title of person signing)

Filing Fee: \$35.00

FILED
06 JAN 11 AM 11:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF CORRECTION

for

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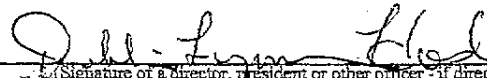
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Debbie Lynn Hoskins
(Typed or printed name of person signing)

Pres.
(Title of person signing)

Filing Fee: \$35.00