

P08000016259

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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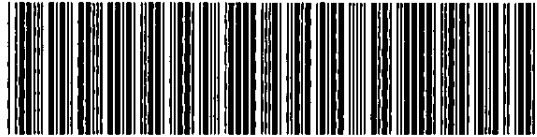
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Articles of Correction w/NC

TB

2-27-08

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: CRITICAL INTERVENTION SERVICES - SUPPORT SERVICES, INC.  
(Name of Corporation)

DOCUMENT NUMBER: P 08000016259

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

Please return all correspondence concerning this matter to the following:

WILLIAM R. SCHOEPP  
(Name of Contact Person)

CIS SUPPORT SERVICES, INC.  
(Firm/Company)

1261 S. MISSOURI AVE.  
(Address)

CLEARWATER, FL 33756  
(City/State and Zip Code)

For further information concerning this matter, please call:

WILLIAM SCHOEPP at ( 727 ) 461-9417  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> \$35.00 Filing Fee       | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status                 |
| <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$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

CRITICAL INTERVENTION SERVICES - SUPPORT SERVICES, INC.  
Name of Corporation as currently filed with the Florida Dept. of State

P08000016259  
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 CORPORATE FILING  
(Document Type Being Corrected)

filed with the Department of State on FEBRUARY 13, 2008  
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

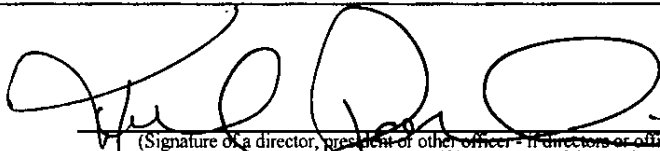
① NAME OF CORPORATION IS INCORRECT

② ONE OFFICER WAS OMITTED.

Correct the inaccuracy, incorrect statement, or defect:

① CORRECT NAME OF CORPORATION IS "CIS SUPPORT SERVICES, INC."

② OFFICER TO ADD: TITLE: OFFICER, WILLIAM R. SCHOEPP, 1261 S. MISSOURI AVE., CLEARWATER, FL 33756



(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.)

KARL C. POULIN

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35.00

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2008 FEB 26 AM 11:55  
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TALLAHASSEE, FLORIDA