

PO9000020870

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 MAR 16 AM 10:33

Art Correction  
@ 3/17/09

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** MIRAMAR TOP HEALTH CARE INC  
(Name of Corporation)

**DOCUMENT NUMBER:** P09000020870

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

Please return all correspondence concerning this matter to the following:

ANA M PENENORI Montoto  
(Name of Contact Person)

MIRAMAR TOP HEALTH CARE INC  
(Firm/Company)

8910 MIRAMAR PARKWAY SUITE 306  
(Address)

MIRAMAR, FL 33025  
(City/State and Zip Code)

For further information concerning this matter, please call:

ANA M PENENORI Montoto at ( 305 ) 926-6921  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

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

MIRAMAR TOP HEALTH CARE INC

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

P09000020870

Document Number (if known)

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
09 MAR 16 AM 10:33

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 P09000020870  
(Document Type Being Corrected)

filed with the Department of State on MARCH 05, 2009  
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

ARTICLE V

CORRECT NAME

ANA M MONTOTO

ANA M PENENORI *Montoto*

ARTICLE VI

ANA MARIA MONTOTO

ANA M PENENORI *Montoto*

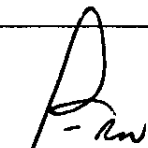
ARTICLE VII

ANA M MONTOTO

ANA M PENENORI *Montoto*

Correct the inaccuracy, incorrect statement, or defect:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

  
(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.)

ANA M PENENORI *Montoto*

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

**Filing Fee: \$35.00**