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Correction
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: COMMUNITY COMFOR	RT SHOES, INC.
DOCUMENT NUMBER: P090000476	529
The enclosed Articles of Correction and fee	are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Jennifer L. Tucker Name of Contact Person	
Kovach & Associates, P.A.	
Post Office Box 635	
Inverness, Florida 34451 City/State and Zip Code	
jlt@flalaw.org E-mail address: (to be used for future annual repo	ort notification)
For further information concerning this mat	ter, please call:
Jennifer L. Tucker Name of Contact Person	at (352) 341-5557 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount	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

COMMUNITY COMFORT SHOES, INC.

P09000047629

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ARTICLES OF CORRECTION for COMMUNITY COMFORT SHOES, INC. Name of Corporation as currently filed with the Florida Dept. of State P09000047629
ARTICLES OF CORRECTION
for ALLER
COMMUNITY COMFORT SHOES, INC.
Name of Corporation as currently filed with the Florida Dept. of State
P0900047629
Document Number (if known)
ursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation filencese Articles of Correction within 30 days of the file date of the document being corrected.
hese articles of correction correct Articles of Incorporation,
(Document Type Being Corrected)
led with the Department of State on $\frac{06/01/2009}{\text{(File Date of Document)}}$.
pecify the inaccuracy, incorrect statement, or defect:
Officer/Director Detail has Community Oxygen, Inc., listed as the President.
Correct the inaccuracy, incorrect statement, or defect:
Officer/Director Detail should list Community Oxygen & Medical, Inc., as the Presider
(Surfature 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.)
Laurene Holder Postidant of Com-
Typed or printed name of person signing) Filing Fee: \$35.00 Tresident of Con (Title of person signing) Exygen in the duc
Filing Fee: \$35.00 Exygen & medic
00