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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: NEUROLOGY & PAIN MEDICINE, INC.
Name of Corporation

DOCUMENT NUMBER: P09000051519

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

Please return all correspondence concerning this matter to the following:

Dr. Angel Miguel Carrasco
Name of Contact Person

Neurology & Pain Medicine, Inc.
Firm Company

1380 N. Krome Avenue, Suite 103
Address

Homestead, FL 33034
City State and Zip Code

angelmiguelcarrascomd@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Bruce M. Bounds, Esq. at (305) 728-1350
Name of Contact 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, FL 32314

Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF CORRECTION

For

Neurology & Pain Medicine, Inc.

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

P09000051519

Document Number (if known)

Pursuant to the provisions of Section 607.0124, Florida Statutes.

These articles of correction correct Articles of Amendment.

(Document Type Being Corrected)

filed with the Department of State on June 7, 2013.

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

ARTICLE VI The new Board of Directors and Shareholders shall be composed by TWO (2) persons, whose names are

ANGEL CARRASCO, MD - President - 60% SHAREHOLDER

1380 N. Krome Avenue, Suite 104, Florida City, FL 33034

Maria C Pena - Vice President - 40% SHAREHOLDER

1380 N. Krome Avenue, SUite 104, Florida City, FL 33034

Correct the inaccuracy, incorrect statement, or defect:

ARTICLE VI The initial Board of Directors shall be composed by ONE (1) person whose name and address is

ANGEL CARRASCO MD - PRESIDENT - 100%

1380 N. Krome Avenue, Suite 103

Florida City, FL 33034

(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.)

Angel M. Carrasco, MD

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: $35.00