Poquu079532

(Requestor's Name) (Address)	300161417463	
(City/State/Zip/Phone #)	10/13/0901042006 **52.50	
(Business Entity Name) (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: Office Use Only	2009 OCT 13: AM 9: 16 SECRETARY OF STATE TALLAHASSEE. FLORIDA TO STATE TALLAHASSEE. FLORIDA	

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Physicians Health Dist	ributions Network, Inc.
DOCUMENT NUMBER: P0900007	
The enclosed Articles of Correction and f	
Please return all correspondence concerni	ing this matter to the following:
William D Snyder Name of Contact Person	<u></u>
Physicians Health Distribution Network	rk, Inc.
16553 Turquoise Trail	
Weston FL 33331 City/State and Zip Code	
CP001@aol.com E-mail address: (to be used for future annual	report notification)
For further information concerning this m	natter, please call:
William D Snyder Name of Contact Person	at (305) 610-9506 Area Code & Daytime Telephone Number
Enclosed is a check for the following amo	ount:
\$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

FILED

for

2009 OCT 13 AM 9: 16

Physicians Health Distribution Network Name of Corporation as currently filed with the Florida Dept. of St	SECRETARY OF
Name of Corporation as currently filed with the Florida Dept. of S	State State
P0900079532 Document Number (if known)	
Pursuant to the provisions of Section 607.0124 or 617.0124, Florida St these Articles of Correction within 30 days of the file date of the documents of the section of the section within 30 days of the file date of the documents.	tatutes, this corporation files ment being corrected.
These articles of correction correct Articles of Incorporation Office	Corrected)
filed with the Department of State on September 23, 2009 (File Date of Document)	
Specify the inaccuracy, incorrect statement, or defect:	
Robert Snyder is To be Removed as President 111 S 21 Ave	Hollywood FL 33020
Scott English is To be Removed as Vice President 111 S 21 A	Ave Hollywood FL 33020
William Snyder is To be Removed as Tres. 16553 Turquoise	Trail Weston FL 33331
*	
,	
Correct the inaccuracy, incorrect statement, or defect:	
Paul Tamberelli is to be Added as Pres/Dir 193 Fox Hollow Ro	oad Wycoff NJ 07481
Robert F Snyder is to be Added as VP/D 111 S 21 Ave Hollyw	ood FL 33020
Scott English is to be Added as T/D 111 S 21 Ave Hollywood	FL 33020
William Snyder is to be Added as S/D 16553 Turquoise Trail V	Veston FL 33331
(Signature of a director, president or other officer - if directors or officent not been selected, by any incorporator - if in the hands of the receiver, other court appointed fiduciary, by that fiduciary.)	ers have trustee, or
William Snyder	S/D
(Typed or printed name of person signing)	(Title of person signing)

Filing Fee: \$35.00