

P09000083646

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6380

From:

Account Name : CORPORATION SERVICE COMPANY
Account Number : I20000000195
Phone : (850) 521-1000
Fax Number : (850) 558-1575

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COR AMND/RESTATE/CORRECT OR O/D RESIGN

DENTAL AND VISION INSURANCE PROFESSIONALS, INC.

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ARTICLES OF CORRECTION

for

Dental and Vision Insurance Professionals, Inc.

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

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Document Number (if known)

Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation hereby
these Articles of Correction within 30 days of the file date of the document being corrected.

These articles of correction correct Articles of Incorporation

(Document Type Being Corrected)

filed with the Department of State on October 9, 2009

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

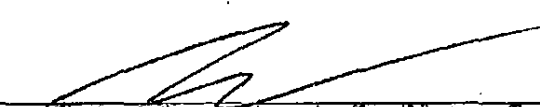
The initial office address of the corporation is:

1600 N.W. 163rd StreetMiami, Florida 33169

Correct the inaccuracy, incorrect statement, or defect:

The initial office address of the corporation is:

60 Edgewater Drive, Apt 17KCoral Gables, Florida 33133


(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.)

Steven J. Schermer

(Typed or printed name of person signing)

Incorporator

(Title of person signing)

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