P1100046547

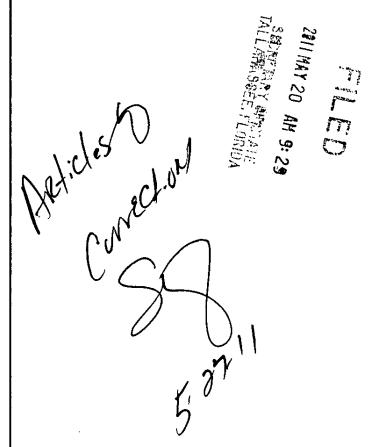
(Re	equestor's Name)	
(Ac	idress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions to Filing Officer:		
:		
	.o **	

Office Use Only



300207636913

05/20/11--01023--003 **35.00



COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: DENTAL SERVICES OF TOWN AND COUNTRY, PA			
DOCUMENT NUMBER: P1100004	•		
The enclosed Articles of Correction and			
Please return all correspondence concern	, ,		
Francia B. Dal uga Fox			
Francis R. DeLuca, Esq. Name of Contact Person			
Firm/Company			
100 SE 6th Street			
Address			
Fort Lauderdale, FL 33301 City/State and Zip Code			
deluca1958@yahoo.com E-mail address: (to be used for future annual)	report notification)		
For further information concerning this m			
Francis R. DeLuca, Esq.	at (954) 523-2700 Area Code & Daytime Telephone Number		
Name of Confact Person	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:	Street Address:		
Amendment Section	Amendment Section		
Division of Corporations	Division of Corporations		
P.O. Box 6327	Clifton Building		
Гallahassee, FL 32314	2661 Executive Center Circle		
	Tallahassee, FL 32301		

ARTICLES OF CORRECTION

for

DENTAL SERVICES OF TOWN AND COUNTRY, PA Name of Corporation as currently filed with the Florida Dept. of State

P11000046547 Document Number (if known)		
Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this c these Articles of Correction within 30 days of the file date of the document being co	orporatio orrected.	n files
These articles of correction correct Articles of Incorporation		
(Document Type Being Corrected)		_•
filed with the Department of State on May 17, 2011 (File Date of Document)	ALLA PLLA	220
Specify the inaccuracy, incorrect statement, or defect:	# 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	MAY 2
The Principal Address and Mailing Address are incorrect.		0
	12.10	
	<u> </u>	- is
	Om.	2
Correct the inaccuracy, incorrect statement, or defect:		
•		
The Principal Address and Mailing Address should read as follows:		
13776 SW 152 St.		
Miami, FL 33177		
ivilatili, i E 00177		
at me		
antono Otero MS		
(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,)		
ALTRONO DOCUM	· /-	

Filing Fee: \$35.00

(Title of person signing)

(Typed or printed name of person signing)