02:58:57 p.m.

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DIVISION OF CORPORATIONS

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Account Number : I20070000136 Phone : (305)779-3564 Fax Number : (305)779-3561

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Main Street Children's	Dental and Orthodontics, P.A.
DOCUMENT NUMBER: P11000086	8862
The enclosed Articles of Correction and fe	
Please return all correspondence concerni	ng this matter to the following:
Ana M. Sanz, Parale	gal
Avila Rodriguez Hernandez Mena	& Ferri LLP
2525 Ponce de Leon Blvd., Suit	e 1225
Coral Gables, FL 331 City/State and Zip Code	34
asanz@arhmf.com E-muil uddress: (to be used for future annual re	eport notification)
For further information concerning this ma	atter, please call:
Ana M. Sanz Nume of Contact Person	at (786) 594-4102 Area Code & Duytime Telephone Number
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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

FAX AUDIT NO. H11000248191 3

ARTICLES OF CORRECTION

for

Main Street Children's Dental and Orthodontics, P.A. Norma of Composition as currently filed with the Florida Dept of State

P11000086862 Document Number (IT known)

Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, these Articles of Correction within 30 days of the file date of the document be	this corporation files sing corrected.
These articles of correction correct Articles of Incorporation [Document Type Heling Corrected])
filed with the Department of State on October 3, 2011 (File Date of Document)	•
Specify the inaccuracy, incorrect statement, or defect:	
Name of corporation is incorrect-should be "Dentilstry" not "Dental"	
Correct the inaccuracy, incorrect statement, or defect:	
Main Street Children's Dentistry and Orthodontics, P.A.	
***************************************	_
	
(Signature of a director, president or other officer - if directors or officers have not like a selected, by an incorporator - if in the lands of the receiver, trustee, or other court appointed fiduciary, by that fiduciary.)	
Melvyn Gober	Descident

Melvyn Gober
(Typed or printed name of person signing)

President (Title of person signing)

Filing Fee: \$35.00