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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Total Private Palm Beach Home Health, Inc.

Name of Corporation

DOCUMENT NUMBER: P1 1000094852

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

Please return all correspondence concerning this matter to the following:

Stephen Lostumbo

Name of Contact Person

Total Private Palm Beach Home Health, Inc.

Firm/Company

9045 La Fontana Blvd, suite 223

Address

Boca Raton, FL 33434

City/State and Zip Code

randrade@totalhh.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rodrigo Andrade

....954

822-0837

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
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF CORRECTION

For

Total Private Palm Beach Home Health, Inc	3.0
Name of Corporation as currently tiled with the Florida De	2813 ALL
Document Number (if known)	——
	SS I
Pursuant to the provisions of Section 607.0124 or 617.0124, Florithese Articles of Correction within 30 days of the file date of the contraction of the contraction within 30 days of the file date of the contraction.	da Statutes, this corporation files clocument being corrected.
These articles of correction correct Article II	Being Corrected)
filed with the Department of State on Oct. 23, 2013 (File Date of Document)	\sim ω
Specify the inaccuracy, incorrect statement, or defect:	
Correction of company and mailing address of To	otal Private Palm Beach.
	_
Correct the inaccuracy, incorrect statement, or defect:	
Correct address is: 9045 La Fontana Blvd, suite 22	23, Boca Raton, FL. 33434
(Signature of a director, president or other of free - ill directors not been selected, by an incorporator - if in the hands of the recother count appointed fiduciary, by that fiduciary.)	or officers have cylver, trustee, or
Alain J Hernandez	President
(Typed or printed name of person signing)	(Title of person signing)

Filing Fee: \$35.00