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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: LUIS MANUEL ZAVAL	A MD PA Name of Corporation	
DOCUMENT NUMBER: P1200001		
The enclosed Articles of Correction and f	Gee are submitted for filing.	
Please return all correspondence concerni	ing this matter to the following:	
RALPH SERRANO CPA		
Name of Contact Person		
RALPH SERRANO CPA		
Firm/Company		
9425 SW 72 ST #233		
Address		
MIAMI, FL. 33173		
City/State and Zip Code		
RALSER@MSN.COM E-mail address: (to be used for future annual a	raport notification	
E-man address. (to be used for future annual)	report normalion)	
For further information concerning this m	natter, please call:	
RALPH SERRANO Name of Contact Person	at (305) 412-7273 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

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LUIS MANUEL ZABALA MD PA Name of Corporation as currently filed with the Florida Dept. of State

Secretary of Stages Taleahasse Somoa

P12000010119

Document Names (It known)
Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation files 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 JANUARY 30, 2012 (File Date of Document)
Specify the inaccuracy, incorrect statement, or defect:
INCORRECT CORPORATE NAME OF LUIS MANUEL ZABALA MD PA
INCORRECT REGISTERED AGENT NAME OF LUIS ZABALA MD PA
INCORRECT CORPRATE OFFICER NAME OF LUIS M. ZABALA
INCORRECT INCORPORATOR NAME OF LUIS MANUEL ZAVALA
ALL THE INCORRECT INFORMATION IS BECAUSE OF THE LETTER B
IN ZABALA
Correct the inaccuracy, incorrect statement, or defect: CORRECT CORPORATE NAME: LUIS MANUEL ZAVALA MD PA
CORRECT REGISTERED AGENT NAME: LUIS ZAVALA
CORRECT CORPORATE OFFICER NAME: LUIS M. ZAVALA
COREECT INCORPORATOR NAME: LUIS MANUEL ZAVALA
(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.)
I !

LUIS MANUEL ZAVALA

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: \$35.00