P12000061588

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SECRE LARY OF STATE
TALLAHASSEE FLORIDA

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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: Hollywood Eye Institute, P.A. DOCUMENT NUMBER: P12000061588 The enclosed Articles of Correction and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Shareen M. Greenbaum Name of Contact Person Hollywood Eye Institute, P.A. 11011 Sheridan St., Suite 215 Cooper City, FL 33026 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Shareen M. Greenbaum Name of Contact Person Enclosed is a check for the following amount: \$43.75 Filing Fee & Certificate of Status **✓** \$35.00 Filing Fee □ \$52.50 Filing Fee, Certificate of Status & ☐ \$43.75 Filing Fee & Certified Copy Certified Copy **Mailing Address: Street Address:** Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301

ARTICLES OF CORRECTION

for

2012 JUL 23 AM 8: 46

President

(Title of person signing)

Hollywood Eye Institute, P.A. TALLAHASSEE FLORIDA
Name of Corporation as currently filed with the Florida Dept. of State
P12000061588 Document Number (if 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 July 13, 2012 (File Date of Document)
Specify the inaccuracy, incorrect statement, or defect:
The suite number in each address INCLUDING the registered agent address
needs to be 215. It was accidentally written as 213.
Correct the inaccuracy, incorrect statement, or defect:
All five (5) addresses on the Articles of Incorporation should be:
11011 Sheridan St., Suite 215
Cooper City, FL 33026
Please correct swite # on Registered Agent
ordalvess
(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.)
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Filing Fee: \$35.00

Shareen M. Greenbaum (Typed or printed name of person signing)