P12000087755

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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C. MUSTAIN

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MARTHA'S RETIREMENT HOME, INC.
Name of Corporation

DOCUMENT NUMBER: P12000087755

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

Please return all correspondence concerning this matter to the following:

JEFF WOLKINS
Name of Contact Person

SCHALLES & ASSOC.
Firm/Company

3204 ALTERNATE 19 NORTH
Address

PALM HARBOR, FL. 34683
City/State and Zip Code

ACCURATE3204@LIVE.COM
E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

JEFF WOLKINS at (727) 785-9942
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

MARTHA'S RETIREMENT HOME, INC.

Name of Corporation as currently filed with the Florida Dept. of State

P12000087755

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 CORPORATE NAME

(Document Type Being Corrected)

filed with the Department of State on 10/31/12.

(File Date of Document)

FILED
12 NOV -5 AM 10:15

Specify the inaccuracy, incorrect statement, or defect:

MARTHA'S RETIREMENT HOME, INC.

Correct the inaccuracy, incorrect statement, or defect:

MT SUNSHINE CARE, INC.

(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.)

DALE A. LERCH

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)

Filing Fee: $35.00