P1300001514

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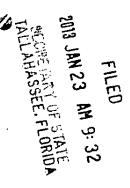
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COVER LETTER

TO: Amendment Section **Division of Corporations** SUBJECT: Physicians Medical Billing Specialists Inc DOCUMENT NUMBER: P13000001514 The enclosed Articles of Correction and fee are submitted for filing. Please return all correspondence concerning this matter to the following: June Valls Name of Contact Person Physicians Medical Billing Specialists Inc Firm/Company 207 Dolphin Cove Ct Bonita Springs, FI 34134 ivalls0001@comcast.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: June Valls Name of Contact Person Enclosed is a check for the following amount: **\$35.00** Filing Fee □ \$43.75 Filing Fee & Certificate of Status □ \$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

Tallahassee, FL 32301

2661 Executive Center Circle

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF CORRECTION

FILED

For

2013 JAN 23 AM 9: 33

Physicians Medical Billing Specialists Inc

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

P13000001514

SECHETARY OF STATE IAULAHASSEE, FLORIDA

(Title of person signing)

Docume	nt Number (if known)
Pursuant to the provisions of Section 607.0124 these Articles of Correction within 30 days of	4 or 617.0124, Florida Statutes, this corporation files the file date of the document being corrected.
These articles of correction correct Effective	e date of corporation,
lon A	(Document Type Being Corrected)
filed with the Department of State on Jan. 4	(File Date of Document)
Specify the inaccuracy, incorrect statement, or	
Effective date of corporation	
Correct the inaccuracy, incorrect statement, or	· defect:
Please change the effective date	for this corporation from Feb. 1, 2013 to
Jan. 23, 2013.	
(Signature of a director, presider	t or other officer - if directors or officers have
not been selected, by an incorps other court appointed liduciary.	orator - if in the hands of the receiver, trustee, or by that fiduciary.)
JUNE VALLS	President

Filing Fee: \$35.00

(Typed or printed name of person signing)