

P130000098221

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

MAIL

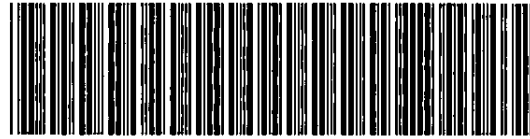
(Business Entity Name)

(Document Number)

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DIVISION OF CONCORDANCE
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Art Correction
Name of
(1a) 12/31/13

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Carlos B Castillo PA
Name of Corporation

DOCUMENT NUMBER: P13000098221

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

Please return all correspondence concerning this matter to the following:

Carlos B. Castillo
Name of Contact Person

1 Alhambra Plaza, Suite 600
Firm/Company
Address

Coral Gables, FL 33134
City/State and Zip Code

cbeast11067@icloud.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carlos B. Castillo at (305) 772-5096
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | |
|--|---|
| <input checked="" type="checkbox"/> \$35.00 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status |
| <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$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

Carlos B Castillo PA

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

P13000098221

Document Number (if known)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
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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

December 10, 2013

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

Carlos B Castillo PA

Period
Needed

Comma
Needed

Period
Needed

Period
Needed

Correct the inaccuracy, incorrect statement, or defect:

Carlos B. Castillo, P.A.



(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.)

Carlos B. Castillo

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35.00