

P14000008309

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Articles of
Correction

03/03/14--01040--005 **35.00

FILED
2014 FEB -3 PM 4:44
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

DR
2/17/14

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Genoma Home Health Care Agency, Inc
Name of Corporation
DOCUMENT NUMBER: P 1400000 8309

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

Please return all correspondence concerning this matter to the following:

Raydel Miranda
Name of Contact Person
Genoma Home Health Care Agency Inc
Firm/Company
1499 Forest Hill Blvd, Suite 106
Address
Lake Clarke Shores, Palm Beach, FL 33404
City/State and Zip Code
pedisupport@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Raydel Miranda at (561) 568-9583
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

FILED

For

GENOMA Home Health Care Agency, Inc.

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

2014 FEB -3 PM 4:44

DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

P14000008309

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

Article of Incorporation
(Document Type Being Corrected)

filed with the Department of State on

1-24-2014
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

The suite number was incorrect (107)

Correct the inaccuracy, incorrect statement, or defect:

Correct Suite is (106)

(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.)

RAYDEL MIRANDA

(Typed or printed name of person signing)

President

(Title of person signing)

Filing Fee: \$35.00