P140008

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TI SER -8 ANTI:

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: DAVID LAZAR, N	ID, PA	
DOCUMENT NUMBER: P140000690	me of Corporation	
The enclosed Articles of Correction and fee	are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
JEROME L. ROSEN	•	
JEROME L, ROSEN, CI	PA	
7880 N UNIVERSITY DRI	VE, #201	
TAMARAC, FL 33321 City/State and Zip Code		
JULIEM@TAYKANCPA		
E-mail address: (to be used for future annual report further information concerning this matter.)	•	
JEROME L. ROSEN	-	
Name of Contact Person	at (954) 722-9250 Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount	nt:	
■ \$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

FILED

For

14 SEP -8 AN 11:25

DAVID LAZER, N	MD.	PA
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MD, PA

Name of Corporation as currently filed with the Florida Dept. of Pate ALASTIC PLONIDAL

P14000069002	, (
Document Number (if known)	

Document Number (it 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 AUGUST 19, 2014 (File Date of Document)
Specify the inaccuracy, incorrect statement, or defect: PART OF NAME OF CORPORTION WAS MISSPELLED
Correct the inaccuracy, incorrect statement, or defect: NAME OF CORPORATION SHOULD BE SPELLED AS FOLLOWS: DAVID LAZAR, MD, PA
· · · · · · · · · · · · · · · · · · ·
(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.)
JEROME L ROSEN INCORPORATOR

(Typed or printed name of person signing)

(Title of person signing)

Filing Fee: \$35.00