## P15000009a84

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articles of. Correction

02/26/15--01006--027 \*\*166.25

2015 FEB 26 PH 12: 53

100R 2/17/15

## **COVER LETTER**

TO: Amendment Section Division of Corporations				
SUBJECT:	CMS CORP			
DOCUMENT NUMBER: P	Name of Corporation 1500009284			
The enclosed Articles of Correction and	fee are submitted for filing.			
Please return all correspondence concern	ing this matter to the following:			
JOYCE M. FOL	_TZ			
Name of Contact Person WCMS CORI	P			
1790 ASTOR FARMS	S PLACE			
SANFORD, FL 32771  City/State and Zip Code				
JFOLTZ@WCMSCO				
For further information concerning this matter, please call:				
JOYCE M. FOLTZ  Name of Contact Person	at ( 407 ) 818-0676			
Enclosed is a check for the following am	ount:			
□ \$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	
WCMS CORP	2015 FEB 26 PH 12: 53
Name of Corporation as currently filed with the Florida D P15000009284  Document Number (if known)	FALLAHASSEE, FLORIDA
Pursuant to the provisions of Section 607.0124 or 617.0124, Flor these Articles of Correction within 30 days of the file date of the	rida Statutes, this corporation files document being corrected.  NCORPORATION
These anneies of confection currect	pe Being Corrected)
filed with the Department of State on	
Specify the inaccuracy, incorrect statement, or defect: PRINCIPLE PLACE OF BUSINESS AND MAILING AD	DRESS CORRECTION
Correct the inaccuracy, incorrect statement, or defect:	
255 PRIMERA BLVD. SUITI	≣ 160
LAKE MARY, FL 32746	5
(Signature of a director, president of other officer - if director not been selected, by an incorporator - if in the hands of the other court appointed fiduciary, by that fiduciary.)	s of officers have receiver, trustee, or
JOYCE M. FOLTZ	PRESIDENT
(Typed or printed name of person signing)	(Title of person signing)

Filing Fee: \$35.00