P150000031889

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Auf Correction Name chs (10 4.22.15

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: <u>amanada</u>	Lindahl, PA	
DOCUMENT NUMBER: P150	00031889	
The enclosed Articles of Correction and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Name of Contact Person	uller	
148tonic Fra	ucid Senices The	
431 N. Summo	duAre	
Orland Fl 32803 City/State and Zip Code		
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:		
Name of Contact Person	at (321) 945 3797 Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount:		
\$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

For



AMANADA LINDAHL, PA.

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

P15000031889
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 1 (Document Type Being Corrected)
(botalist Type Being Consoles)
filed with the Department of State on 4/7/2015
(File Date of Document)
Specify the inaccuracy, incorrect statement, or defect:
AMANADA LINDAHL, PA.
Correct the inaccuracy, incorrect statement, or defect:
AMANDA LINDAHL, 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.)

AMANDA LINDAHL

PRESIDENT

(Typed or printed name of person signing)

(Title of person signing)

Filing Fee: \$35.00