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LUG 0 5 7014 C. CARROTHERS

ČOVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: LEAH'S LAB & PARAMEDICAL INC.			
DOCUMENT NUMBER: P150000464	me of Corporation 418		
The enclosed Articles of Correction and fee	are submitted for filing.		
Please return all correspondence concerning	this matter to the following:		
LEAH DEMERS			
Name of Contact Person			
5510 CEDARWOOD DRIVE			
SARASOTA, FL 34232 City/State and Zip Code	· 		
LEAHDEMERS@LIVE.			
For further information concerning this mat	ter, please call:		
LEAH DEMERS	at (941) 284-7188		
Name of Contact Person	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:	Street Address:		

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED

ARTICLES OF CORRECTION

For

2015 AUG -3 PM 12: 22

SECRETARY OF STATE

LEAH'S LAB & PARAMEDICAL INC.

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

P1500046418

Document Number (if known)

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Pursuant to the provisions of Section 607.0124 or 617.0124, Florida these Articles of Correction within 30 days of the file date of the do	a Statutes, this corporation files cument being corrected.
These articles of correction correct NAME OF CORPORAT	
(Document Type B	eing Corrected)
filed with the Department of State on 05/16/15	
(File Date of Document)	·
Specify the inaccuracy, incorrect statement, or defect:	
The name of the Corporation is incorrect:	
The correct name of the Corpoaration should be:	
Corless Paramedical and Labs Inc.	
Coriess Faramedical and Labs inc.	
Correct the inaccuracy, incorrect statement, or defect:	-
•,	
	·
	-
(Signature of a director, president or other officer - if directors or not been selected, by an incorporator - if in the hands of the recei other court appointed fiduciary, by that fiduciary.)	officers have ver, trustee, or
Leah Demers	President
(Typed or printed name of person signing)	(Title of person signing)

Filing Fee: \$35.00