

P15000056290

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

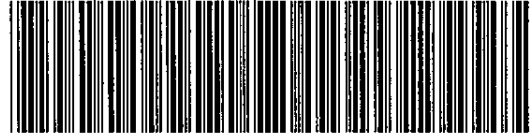
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: CINDY AMBROSE PA
Name of Corporation

DOCUMENT NUMBER: P15000056290

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

Please return all correspondence concerning this matter to the following:

CINDY AMBROSE
Name of Contact Person

Firm/Company

811 NW 73 AVE
Address

PLANTATION FL 33317
City/State and Zip Code

CINDY @ CINDYAMBROSE.COM
E-mail/address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CINDY AMBROSE at (954) 558-2815
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

For

CINDY AMBROSE PA

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

P15000056290

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 6-29-2015
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

CINDY AMBROSE PA

Correct the inaccuracy, incorrect statement, or defect:

CYNTHIA J. AMBROSE 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.)

C AMBROSE

(Typed or printed name of person signing)

D, P

(Title of person signing)

Filing Fee: \$35.00

2015 JUL 14 AM 11:05
DEPT. OF STATE
CORPORATION
DIVISION

FILED