## P15000098388

uestor's Name)	
ress)	
ress)	
/State/Zip/Phone	e #)
☐ WAIT	MAIL
iness Entity Nan	ne)
ument Number)	
Certificates	s of Status
Special Instructions to Filing Officer:	
	ress)  /State/Zip/Phone  WAIT  iness Entity Nar  ument Number)  Certificates

Office Use Only



500280737455

01/08/16--01012--008 \*\*35.00



Art Correction Manuchs

> JAN 12 2015 I ALBRITTON

## **COVER LETTER**

TO: Amendment Section Division of Corporations		
SUBJECT: Michael 3	Arden P. A. ame of Corporation	
DOCUMENT NUMBER: P1500		
The enclosed Articles of Correction and fee	e are submitted for filing.	
Please return all correspondence concerning	g this matter to the following:	
Michael Arden Name of Contact Person	<del></del>	
Michael J. Arden P.	A	
4751 Bonita Bay Blud Unit	- 1101	
Bunita Spring FL :	<u> </u>	
E-mail address: (to be used for future annual rep	ort notification)	
For further information concerning this matter, please call:		
Michael Arden Name of Contact Person	at (815) 861 - 0127 Area Code & Daytime Telephone Number	
Enclosed is a check for the following amou	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

For  Name of Corporation as currently filed with the Florida Dept. of State  ARTICLES OF CORRECTION  ASSOCIATION  No.
For AND AND
Michael J. Arden P.A.
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
filed with the Department of State on $\frac{12/8/2015}{(\text{File Date of Document})}$ .
Specify the inaccuracy, incorrect statement, or defect:
The corporation name Michael J. Arden P. A.
Correct the inaccuracy, incorrect statement, or defect:
The corporation name should be changed to:
Michael Adag PA
Ilichael Arden F.A.
Michael of them
(Signature of a director, president for 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.)
Michael J Arden Director/President
(Typed or printed name of person signing) (Title of person signing)

Filing Fee: \$35.00