

PI 6 0000 26598

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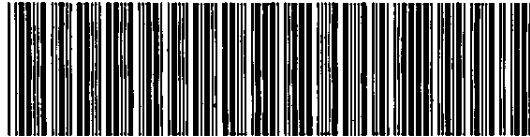
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: PAULGENA SINGH, M-A, P.A.
Name of Corporation

DOCUMENT NUMBER: P16000026598

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

Please return all correspondence concerning this matter to the following:

Russell Wise
Name of Contact Person

Wise & Wise, PLC
Firm/Company

One Towne Square, Ste. 1835
Address

Southfield, Mi 48076
City/State and Zip Code

rwise@wiseandwise.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Russell Wise at (248) 263-3517
Name of Contact Person 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

PAULEENA SINGH, M.D., P.A.

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

P16000026598

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 Electronic Articles of Incorporation
(Document Type Being Corrected)

filed with the Department of State on 3/22/2016
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

Article VIII

Effective date for the
Corporation shall be 04/18/2016

Correct the inaccuracy, incorrect statement, or defect:

Effective date for this
Corporation shall be
03/18/2016

Russell Wise

(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.)

RUSSELL WISE

(Typed or printed name of person signing)

AUTHORIZED AGENT

(Title of person signing)

Filing Fee: \$35.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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