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COVER LETTER

TO:

TO: Amendment Section Division of Corporations		
SUBJECT: WENDY HAF	RPP, PA	
DOCUMENT NUMBER: P1700	Name of Corporation 0061037	
The enclosed Articles of Correction :		
Please return all correspondence con	•	
BARBARA RUIZ-GO	DNZALEZ	
RUIZ-GONZALEZ L		
PO BOX 833059		
MIAMI, FL 33283		
barbara@ruizgonza	lezlaw.com	
For further information concerning the		
BARBARA RUIZ-GONZ	31 (
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 \$tatus	
□ \$43.75 Filing Fee & Certified Cop	oy S52.50 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

WENDY HARPP, PA

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

P17000061037

Document Number (if known)

SCALL STATE OF STATE 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 ARTICLES OF INCORPORATION (Document Type Being Corrected) filed with the Department of State on JULY 18, 2017

med with the Department of State on	(File Date of Document)
Specify the inaccuracy, incorrect statement, of	or defect:
NAME OF CORPORATION IS INCOF	RRECT. IT IS MISSING HER MIDDLE INITIAL
Correct the inaccuracy, incorrect statement, of THE NAME OF THE CORPORAT	or defect: ION SHOULD BE WENDY C. HARPP, PA
	127

(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.)

BARBARA RUIZ-GONZALEZ

(Typed or printed name of person signing)

INCORPORATOR

(Title of person signing)

Filing Fee: \$35.00