P200000 37237

(Requ	estor's Name)	
(Addı	ess)	
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Organization (Augustan)

COVER LETTER

TO: Amendment Section Division of Corporations	•
Toal MD Care Corp	
DOCUMENT NUMBER: P200000	37237
The enclosed Articles of Correctio	n and fee are submitted for filing.
Please return all correspondence co	oncerning this matter to the following:
Tanmay A Patel	
Name of Confact I	erson
Firm/Company	
5 (23 Saler C)	
Address	
Rockledge FL 32955	
City/State and 7,	ip Code
drtany@gmail.com	
E-mail address; (to be used for lutu	ic annual report notification)
For further information concerning	this matter, please call:
Taomay A Patel	at () Area Code Daytime Telephone Number
Name of Contact Person	at ()
1. Cosed is a check for the followi	ng amount:
≈ × × 5 00 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status
** \$43.75 Filing Fee & Certified C	Topy ☐ \$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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF CORRECTION

For

4 MD Care Corp	
Name of Corporation as currently filed with the Florida Dept. of	State
P20000037237	
Document Number (if known)	
These articles of correction correct .Name of business	eles of Incorporation
filed with the Department of State on 05/18/2020 (File Date of Document)	g Corrected)
Specify the inaccuracy, incorrect statement, or defect: Name is wrong as "Toal MD Care Corp"	
EIN Number is "blank"	
Correct the inaccuracy, incorrect statement, or defect: Name should be "Total MD Care Corp"	2020 JUN -8
New EIN number is "85-1147255"	PH (2)
(Signature of a director, president or other officer - if directors or offinot been selected, by an incorporator - if in the hands of the receiver other court appointed fiduciary, by that fiduciary.)	
Tammay A Parel	MD/President
(Typed or punted name of person signing)	(Title of nerson supring)

Filing Fee: \$35.00