

P200000041771

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

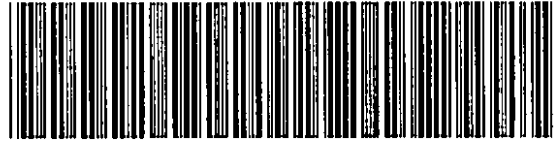
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Art correction
Name chg

JUN 15 2020

1 ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Michael Rains, P.A.

Name of Corporation

DOCUMENT NUMBER: ^{new}_____

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

Please return all correspondence concerning this matter to the following:

Michael Rains

Name of Contact Person

Michael Scott Rains, P.A.

Firm/Company

2887 Temple Trail

Address

Winter Park, FL 32789

City/State and Zip Code

Michaelrainspa@gmail.com

E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Rains

Name of Contact Person

at (407) 325-8414
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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF CORRECTION

For

Michael Rains, P.A.

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

P20000041771

Document Number (if known)

Pursuant to the provisions of Section 607.0124, Florida Statutes.

These articles of correction correct Incorporation new business S-Corp.

(Document Type Being Corrected)

filed with the Department of State on

6/3/2020

File Date of Document

Specify the inaccuracy, incorrect statement, or defect:

The new corporation name is incorrect as Michael Rains, P.A.

This incorporation was filed on-line May 25, 2020 with a document Number (NEW) on the printed receipt.

Tracking number : 300345251773

Correct the inaccuracy, incorrect statement, or defect:

The correct name of business is, Michael Scott Rains, P.A.

Michael Scott Rains

(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.)

Michael Scott Rains

(Typed or printed name of person signing)

Pres.

(Title of person signing)

Filing Fee: \$35.00

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