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R. WHITE  
JUN 23 2011

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Paraiso Mental Health Inc.  
Name of Corporation

**DOCUMENT NUMBER:** P20000070781

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

Please return all correspondence concerning this matter to the following:

Carlos Batista  
Name of Contact Person

Paraiso Mental Health Inc.  
Firm/Company

1951 NW 7th Ave. Ste. 160/170  
Address

Miami, FL 33136  
City/State and Zip Code

C.batista@LuminousClinicalResearch.com  
E-mail address\* (to be used for future annual report notification)

For further information concerning this matter, please call:

Carlos Batista at ( 786 ) 498-9462  
Name of Contact Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

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| <input checked="" type="checkbox"/> \$35.00 Filing Fee       | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status                 |
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**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

Paraiso Mental Health Inc.

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

P20000070781

\_\_\_\_\_  
Document Number (if known)

Pursuant to the provisions of Section 607.0124, Florida Statutes.

These articles of correction correct Articles of Incorporation for Paraiso Mental Health Inc.  
(Document Type Being Corrected)

filed with the Department of State on September 3, 2020  
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

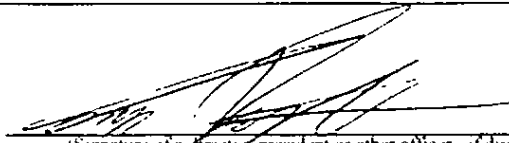
Article I - Business corporation name currently states the following: Paraiso Mental Health Inc.

Article II - Both principal and mailing address state the following: 1951 NW 7th Avenue Suite. 160/170 Miami,  
FL 33136

Correct the inaccuracy, incorrect statement, or defect:

Article I - Business corporation name should be changed to the following: Paraiso Community Health Inc.

Article II - Both principal and mailing address should be changed to the following: 2455 SW 27th Avenue  
Suite 110 Miami, FL 33145



\_\_\_\_\_  
(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.)

Carlos Batista

\_\_\_\_\_  
(Typed or printed name of person signing)

President

\_\_\_\_\_  
(Title of person signing)

**Filing Fee: \$35.00**