

P21000044703

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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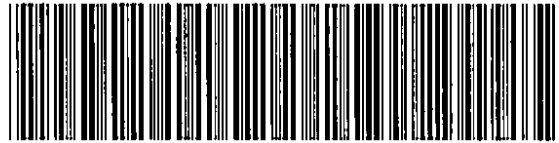
(Business Entity Name)

(Document Number)

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2021 MAY 24 AM 11:11

SECRETARY OF STATE  
TALLAHASSEE, FL

A. Butler

## COVER LETTER

TO: Amendment Section  
Division of Corporations

SUBJECT: LA CONSULTA MEDICAL AND BEHAVIORAL CENTER, INC  
Name of Corporation

DOCUMENT NUMBER: P21000044703

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

Please return all correspondence concerning this matter to the following:

85 Grand Canal Drive Suite #104 Miami - FL 33144  
Name of Contact Person

MARCIA ESPINOZA  
Firm/Company

85 Grand Canal Drive #104  
Address

Miami - Florida 33144  
City/State and Zip Code

espinoza\_marcia@yahoo.com  
E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

MARCIA ESPINOZA at ( 305 ) 300-6533  
Name of Contact Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

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

For

2021 MAY 24 AM 11:11

LA CONSULTA MEDICAL AND BEHAVIORAL CENTER, INC

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

P21000044703

(Document Number (if known))

Pursuant to the provisions of Section 607.0124, Florida Statutes.

These articles of correction correct \_\_\_\_\_  
(Document Type Being Corrected)

filed with the Department of State on 05/10/2021  
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

The officer/director's last name  
(Jaime Espinoza) is incorrect.

Correct the inaccuracy, incorrect statement, or defect:

The officer/director's last name correct  
is Jaime Martinez.

(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.)

Marcia Espinoza  
(Typed or printed name of person signing)

VP

(Title of person signing)

Filing Fee: \$35.00

**Florida** FLORIDA  
COL CLASS B  
M635-436-70-311-0  
JAIME RAMON MARTINEZ  
233 SW 102ND CT  
MIAMI, FL 33174-1783  
DOB: 08-31-1970 SEX: M  
ISSUED: 01-10-2014  
EXPIRES: 08-31-2022  
ENDORSE  
SAFE DRIVER  
Operation of a motor vehicle is restricted to any category not required for