P25000014110

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: x62969

To: Department Of State, Division Of Corporations
From: Amanda Miller
Ext: x62969
Date: 04/17/25
Order #: 1938658-1
Re: Lumina Care Medical Staff, P.A.
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:
Amount to be deducted from our State Account: $35.00 - FL State Account Number: I20000000195

Please take the following action:
File in your office on basis
Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: LUMINA CARE MEDICAL STAFF, P.A.
Name of Corporation

DOCUMENT NUMBER: P25000014110

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

Please return all correspondence concerning this matter to the following:

Kimberly Redmond
Name of Contact Person

Garfunkel Wild, P.C.
Firm/Company

350 Bedford Street, Suite 406
Address

Stamford, CT 06901
City/State and Zip Code

kredmond@garfunkelwild.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Kimberly Redmond at (203) 399-0514
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 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

FILED
2025 APR 17 AM 10:34

For

LUMINA CARE MEDICAL STAFF, P.A.

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

P25000014110

Document Number (if known)

Pursuant to the provisions of Section 607.0124, Florida Statutes.

These articles of correction correct Articles of Incorporation,

(Document Type Being Corrected)

filed with the Department of State on 03/11/2025.

(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

Art. II of the Articles of Incorporation incorrectly states the Principal Office as 1201 NE 175 St. Miami FL 33162

Art. V of the Articles of Incorporation incorrectly states the Initial Directors address as 1201 NE 175 St. Miami FL 33162

Art. VII of the Articles of Incorporation incorrectly states the address of the Incorporator as 1201 NE 175

St. Miami FL 33162

Correct the inaccuracy, incorrect statement, or defect:

Art. II of the Articles of Incorporation is corrected to state the Principal Office as 633 167th Street, N Miami Beach, FL 3316

Art. V of the Articles of Incorporation is corrected to state the Initial Directors address as 633 167th Street,

N Miami Beach, FL 33162

Art. VII of the Articles of Incorporation is corrected to state the address of the Incorporator as 633 167th

Street, N Miami Beach, FL 33162

Dr. Jeffrey Jones, M.D.

(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.)

Jeffrey F. Jones, M.D.

(Typed or printed name of person signing)

Director

(Title of person signing)

Filing Fee: $35.00

CSC AMEND-277559