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| (Re | questor's Name) | |
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| (Cit | y/State/Zip/Phone # | <i>f</i>) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Name | <u>.</u>) |
| (Do | cument Number) | <u> </u> |
| Certified Copies | _ Certificates o | of Status |
| Special Instructions to | Filing Officer: | E |
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SEURETARY OF STATE

At-of Correction

COVER LETTER

| TO: Amendment Section Division of Corporations | | |
|---|--|--|
| SUBJECT: RAN | IDITA INC une of Corporation | |
| DOCUMENT NUMBER: P09000044 | 478 | |
| The enclosed Articles of Correction and fee | are submitted for filing. | |
| Please return all correspondence concerning | g this matter to the following: | |
| GERARDO MORAN Name of Contact Person | | |
| INMIGRATON SERVICES | | |
| Firm/Company | | |
| 400 N. FERN CREEK AV | | |
| Address | | |
| ORLANDO FLORIDA 32803 City/State and Zip Code | | |
| GMORAN@BELLSOUTH.NET E-mail address: (to be used for future annual rep | Ort notification) | |
| For further information concerning this mat | ter, please call: | |
| GERARDO MORAN Name of Contact Person | _ at (407) 924-2136 Area Code & Daytime Telephone Number | |
| Enclosed is a check for the following amou | nt: | |
| ☐ \$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: | Street Address: | |

Amendment Section

Clifton Building

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Amendment Section

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32314

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ARTICLES OF CORRECTION

for

| RANDITA INC |
|--|
| Name of Corporation as currently filed with the Florida Dept. of State |
| P09000044478 |
| Document Number (if known) |
| Pursuant to the provisions of Section 607.0124 or 617.0124, Florida Statutes, this corporation files these Articles of Correction within 30 days of the file date of the document being corrected. |
| These articles of correction correct ARTICLE IV - CAPITAL STOCK (Document Type Being Corrected) |
| filed with the Department of State on 05/19/2009 (File Date of Document) |
| Specify the inaccuracy, incorrect statement, or defect: |
| THE RIGHT STOCK OF THIS CORPORATION AND THE MAXIMUM |
| MUMBER OF SHARES OF STOCK THAT THIS CORPORATION IS AUTHORIZED |
| TO ISSUE IS 1000. |
| |
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| Consider the transport of the state of the s |
| Correct the inaccuracy, incorrect statement, or defect: |
| THE RIGHT AUTHORIZED STOCK OF THIS CORPORATION WERE 100 SHARES |
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| |
| (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.) |
| CASENILIA IALI |
| GASEN HAJALI DIRECTOR (Typed or printed name of person signing) (Title of person signing) |

Filing Fee: \$35.00