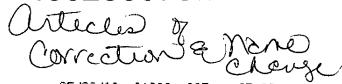
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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: The Adidi Foundation	Name of Corporation
DOCUMENT NUMBER: N12000005	,
The enclosed Articles of Correction and f	ee are submitted for filing.
Please return all correspondence concerni	ng this matter to the following:
Nicole corning Name of Contact Person	
Firm/Company	
2800 S Adams St. Unit 7333 Address	
Tallahassee, Fl 32301 City/State and Zip Code	
lightyearmedia@gmail.com E-mail address: (to be used for future annual o	report notification)
For further information concerning this m	natter, please call:
Nicole Corning Name of Contact Person	at (850) 329 665 C Area Code & Daytime Telephone Number
Enclosed is a check for the following amo	ount:
\$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 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF CORRECTION

for

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		a diam bear
N	The Adidi Foundation Inc Corporation as currently filed with the Florida Dept. of State	12 MAY 30 PM 12: 2:5
Name of C	Corporation as currently free with the Profile Dept. of State	20 May 20 1811 15: 50
	N12000005191 Document Number (if known)	SECRETARY OF STATE
Pursuant to the provisions of Sect these Articles of Correction within	tion 607.0124 or 617.0124, Florida Statu n 30 days of the file date of the documen	ites, this corporation files nt being corrected.
These articles of correction correct	ct Florida Not For Profit Articles (Document Type Being Con	rected)
filed with the Department of State	e on 05/23/2012 (File Date of Document)	
Specify the inaccuracy, incorrect	statement, or defect:	
The Name of the corporation	is written as the Adidi Foundation.	
	·	
		······································
Correct the inaccuracy, incorrect		
The Aditi Foun	dation Inc	
	<u> </u>	
A A BROWN	M director, president or other officer - if directors or officers	s have
not been ke other court	elected by an incorporator - if in the hands of the receiver, true appointed fiduciary, by that fiduciary.)	Suec, Of
(Typed or printed name of pe	2 Comiry erson signing)	(Title of person signing)
	- -	

Filing Fee: \$35.00