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(R	Requestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Barley's Dream	e of Corporation
DOCUMENT NUMBER: N1900	00007823
The enclosed Articles of Correction and fee a	are submitted for filing.
Please return all correspondence concerning	this matter to the following:
La Murra y Name of Contact Person	
Barley's Dream, Ir	<u> 1C.</u>
4550 47th St. W. #	4932
Bradenton Fl. 3	4210
Camuray 95 & E-mail address: (to be used for future annual report	gmail. com
For further information concerning this matter	er, please call:
La Murray Name of Contact Person	at (813) 500-9291 Area Code & Daytime Telephone Number
Enclosed is a check for the following amoun	t:
□ \$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

Name of Corporation as currently filed with the Florida Dept, of State	
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 Articles of Incurporation. (Document Type Being Corrected)	
filed with the Department of State on July 24, 2019.	
Specify the inaccuracy, incorrect statement, or defect: Name of Corporation as Barkey's Dram, Inc	_
72.5 19 A	
AUG 7 106 2 11 25 25 25 25 25 25 25 25 25 25 25 25 25 2	
Correct the inaccuracy, incorrect statement, or defect:	
Correction requested - Name change of	
incorporation to	
Opossumology, Inc.	
(Signature of a director, presidest or other officer - if director of officers have not been selected, by an incorporator - if in the hands of the refeiver, trustee, or other court appointed fiduciary, by that fiduciary.)	
Camuray President (Typed or printed name of person signing) (Title of person signing)	

Filing Fee: \$35.00