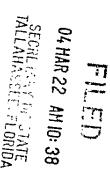
## P04000044674

(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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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporation	ıs			
SUBJECT: QUI  DOCUMENT NUMBER:	`	• ′		
DOCUMENT NUMBER:	04000	0 446	14	
The enclosed Articles of Corre	ction and fee are s	ubmitted for fi	ling.	
Please return all correspondence	e concerning this	matter to the fo	ollowing:	
	JO E (Name of	ISMA Person)	IL	
	ABA	T/Company)		
2510			E, #120	
For further information concer	MAM (City/State an	FC.		
AZIZ (Name of Person)	at (	305) (Area Code &	Daytime Telephone Number)	
Enclosed is a check for the following	owing amount:			
\$35.00 Filing Fee		<b>□</b> \$43.75 1	□ \$43.75 Filing Fee & Certificate of Status	
☐ \$43.75 Filing Fee &	Certified Copy	S52.50 I Certified	Filing Fee, Certificate of Status & Copy	
Mailing Address Amendment Secondivision of Corp. P.O. Box 6327 Tallahassee, Flo	ction porations	Am Div 409	eet Address: endment Section rision of Corporations E. Gaines Street lahassee, Florida 32399	

ARTICLES OF CORRECTION  O4 MAR 20
for 04 MAR 22
for  SECRITATION: 38  OUTZNOSONE INC.  Name of Corporation as currently filed with the Florida Dept. of State  O4 MAR 22 AM 10: 38  FLORIDA
P04-000 44674  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 ARTICLES OF INCORPORATION (Document Type)
filed with the Department of State on 3 11 2004 (File Date of Document)
Specify the inaccuracy, incorrect statement, or defect:
PRINCIPAL ADDRESS & MAILING ADDRESS
IS INCORRECT,
1000 S.W. 191 Avenue
Pembroke Pines FC 33029
Correct the inaccuracy, incorrect statement, or defect:  PRINCIPAL ADDRESS & MAILING ADDRESS
IS: 1364 NW 135 th AVENUE
PEMBROKE PINES, FL. 33028
(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.)
YOUSUF SALMANI PRESIDENT
(Typed or printed name of person signing) (Title of person signing)

Filing Fee: \$35.00