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TRANSMITTAL LETTER

	ndment Section ion of Corporations				
SUBJECT:_	PARADIGM TNUMBER: POS	TITLE (Name of Co.	AND rporation)	ESCROW,	INC.
DOCUMEN	T NUMBER: POS	500003	0516		
The enclosed	Articles of Correction	and fee are su	ibmitted for	r filing.	
Please return	all correspondence cor	ncerning this n	natter to the	e following:	
	LAR	A SHA	11		
		(Name of Firm		1, P.K.	
).BOX	739		
_	Fo	RT LA	DERD	ALE, FL	33302
For further in	formation concerning (his matter, ple	ease call:		
LARA	S HAH (Name of Person)	at (_	954 (Area Code	522-010	2.
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Enclosed is a	check for the following	g amount:			
x \$3:	5.00 Filing Fee		5 \$43.7	5 Filing Fee & Cer	tificate of Status
□ \$43	3.75 Filing Fee & Certi	fied Copy	□ \$52.5 Certif	0 Filing Fee, Certilied Copy	icate of Status &
	Mailing Address: Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, Florida 3	-	- A I 4	itreet Address: Amendment Section Division of Corpora 09 E. Gaines Street Callahassee, Florida	tions

ARTICLES OF CORRECTION

for

PARADIGM TITLE AND ESCROW, INC.

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

P 65 00 0	•
Pursuant to the provisions of Section 607.0124 or 6 these Articles of Correction within 30 days of the fi	17.0124, Florida Statutes, this corporation files ile date of the document being corrected.
These Articles of Correction correct ARTIC	ES OF INCORPORATION
filed with the Department of State on 02/	25/05 le Date of Document)
Specify the inaccuracy, incorrect statement, or defe	ct:
Name of president she	
LARA S. S.	HAH, P.A.
NOT LARA. S. SI	HAW, P.A.
Correct the inaccuracy, incorrect statement, or defe	ct: SHOULD READ:
P.O. BOX 739	7
	ME, FL 33302
NOT SOUTH PALM	BEACH ADBRESS.
(Signature of a director, president or other not been selected, by an incorporator - it other court appointed fiduciary, by that	r officer - if directors or officers have in the hands of the receiver, trustee, or
LARA SHAH	President
(Typed or printed name of person signing)	(Title of person signing)

Filing Fee: \$35.00