P0600002651

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Advanced Dryout, Inc.		
DOCUMENT NUMBER: P0600000	Name of Corporation) 02651	
The enclosed Articles of Correction and for	ee are submitted for filing.	
Please return all correspondence concerni	ng this matter to the following:	
Robert Lassiter		
(Name of Contact Person)		
Advanced Dryout, Inc		
4949 SR 64 East # 217 (Address)		
Bradenton, FL 34208 (City/State and Zip Code)		
For further information concerning this m	natter, please call:	
Robert Lassiter	at (941) 744-1164 (Area Code & Daytime Telephone Number)	
(Name of Contact Person)	(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	Street Address: Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327	Clifton Building	
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	

ARTICLES OF CORRECTION

for	RALI
Advanced Dryout, Inc	T State SSS
Name of Corporation as currently filed with the Florida Dept. of	r State S
P0600002651	E 0 78 F
Document Number (if known)	
Pursuant to the provisions of Section 607.0124 or 617.0124, Florida these Articles of Correction within 30 days of the file date of the doc	ument being corrected.
These articles of correction correct Electronic Articles of Incor	poration ,
filed with the Department of State on 05 January 2006 (File Date of Document)	
Specify the inaccuracy, incorrect statement, or defect:	
Additional Officer and/or director	
	_
Correct the inaccuracy, incorrect statement, or defect: Additional Initial Officer and/or Director	
Title: Secty/ Treas.	
Gene L. Chilton	
4949 SR 64 East # 217	
Bradenton, FI 34203	-
(Signature of a director, president or other officer - if directors or o not been selected, by an incorporator - if in the hands of the receiv other court appointed fiduciary, by that fiduciary)	
Robert Lassiter	President
(Typed or printed name of person signing)	(Title of person signing)

Filing Fee: \$35.00