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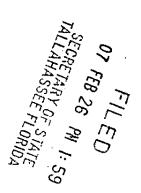
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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: GAMEZ DOCUMENT NUMBER: POF	Professional Drilling, INC (Name of Corporation) 7-000018522	
The enclosed Articles of Correction and I	ee are submitted for filing.	
Please return all correspondence concerni	ing this matter to the following:	
Luis M. Garage (Name of Contact Person) Account in G. Fro (Firm/Company) 399 "F" Lutter, (Address) Coee FL 3 (City/State and Zrp Code) For further information concerning this management of Contact Person)	fersionac Serv. Drise St. 4761	
Enclosed is a check for the following amount \$35.00 Filing Fee & Certified Copy	ount: \$\int\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$	
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
GAMEZ PROFESSIONAL DRIVING INC.
Name of Corporation as currently filed with the Florida Dept, of State
サ0700001852 2 電 n
Document Number (it 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 TACORPORATION OF TO (Document Type Being Corrected)
filed with the Department of State on <u>February</u> 69, 200.7
Specify the inaccuracy, incorrect statement, or defect:
Anticle V- ROGISTERES HOMT Address
MAS CHANGEX
Arricle VII - OFFICER DIRECTOR Address
has CHANGED
Ansicle II - Principa Place of Business Address
Correct the inaccuracy, incorrect statement, or defect:
ARTICLE V:- Luis M. GAMEZ, 520 3rd ST.,
Ocoee, FL 34761
ARTICLE VII - Luis M. GAMEZ, 520 3rd ST.,
Ocoee, FL 34761
Aprille II - 520 3rd ST., Ocoee, FC 34761
4.40.
(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.)
LAIS M. GAMEZ Tresident.
(Typed or printed name of person signing) (Fille of person signing)

Filing Fee: \$35.00