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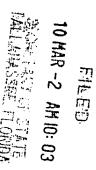
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Mr. of Jen

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: DINNER CLUB	FOODS ON MALABAR INC
DOCUMENT NUMBER: Plood	00009912
The enclosed Articles of Correction and f	fee are submitted for filing.
Please return all correspondence concerni	ing this matter to the following:
Name of Contact Person	
DINGER CLUB MODS ON MALE	BAR INC
1200 MALABAR RD SE	<u> </u>
PALM BAY FL 329 City/State and Zip Code	<u>01</u>
504 421 SEWOUTH . NE	report notification)
For further information concerning this m	natter, please call:
NICHOLAS CHIOS Name of Contact Person	at (321) 676 - 9099 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 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
P1000000 9917 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 <u>ELECTABNIC ALTICLES OF INCORPORATION</u> , (Document Type Being Corrected)
filed with the Department of State on February 02, 2010.
Specify the inaccuracy, incorrect statement, or defect:
OMITTED ONE DIRECTOR/ OFFICER
- 2 E
Correct the inaccuracy, incorrect statement, or defect:
DO JERROD HARLAN D/UP
195 MUEL ROAD CIACLE
Mockied66 FC 72955
(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.)
NICHOLAS CHIOS PRESIDENT
(Typed or printed name of person signing) (Title of person signing)

Filing Fee: \$35.00