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COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: DELVON, INC.		
DOCUMENT NUMBER: P12000101	Name of Corporation	
The enclosed Articles of Correction and fe	ee are submitted for filing.	
Please return all correspondence concerning	ng this matter to the following:	
ADRIANA MORENO		
Name of Contact Person		
WXC CORPORATION	·	
Firm/Company		
8300 NW 53RD ST ST	E 350	
DORAL, FL 33166		
AMORENO@WXCCO E-mail address: (to be used for future annual re		
For further information concerning this ma	-	
ADRIANA MORENO	at (305)742-2187	
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 Division of Corporations	Street Address: Amendment Section Division of Corporations	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF CORRECTION

For

SECRETARY OF STATE
12 DEC 20 PM 12

DELVON, INC.

Name of Corporation as currently filed with the Florida Dept. of State P12000101725 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 THOUPSTATION filed with the Department of State on $\frac{12}{14}$ (File Date of Document) Specify the inaccuracy, incorrect statement, or defect: NO NAMES ARE SPECIFIED UNDER OFFICER AND DIRECTOR DETAILS. Correct the inaccuracy, incorrect statement, or defect: THE PRESIDENT FOR THIS COMPANY WILL BE "DELVON INC" UNDER THE FOLLOWING ADDRESS: 1835 NE MIAMI GARDENS DRIVE #387, NORTH MIAMI BEACH, FL 33179.

(Signature of a directory president of 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.)

CARLOS E. DELGADO

ON BEHALF OF "DELVON INC"

(Typed or printed name of person signing)

(Title of person signing)

Filing Fee: \$35.00