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COVER LETTER

TO: Amendment Section Division of Corporations				
SUBJECT: Slimlife Science,	Inc.			
DOCUMENT NUMBER: P13000069	•			
The enclosed Articles of Correction and fe	e are submitted for filing.			
Please return all correspondence concernin	g this matter to the following:			
Natasha Waite				
Name of Contact Person	· .			
American Incorporation S	ervices			
Firm/Company	44.04			
7561 Violet ₩ Ave. #101				
Las Vegas ,NV 89130				
City/State and Zip Code				
nwaite207@yahoo.com	1			
E-mail address: (to be used for future annual re				
For further information concerning this ma	atter, please call:			
Natasha Waite	760 579-3342			
Name of Contact Person	Area Code & Daytime Telephone Number			
	‡			
Enclosed is a check for the following amou	unt:			
3 \$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			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301			

ARTICLES OF CORRECTION

ARTICLES OF CORR	Florida Dept. of State
For	
Slimlife Science, Inc.	, and the second
Name of Corporation as currently filed with the l	Florida Dept. of State
P13000069220	
Document Number (if known	
ursuant to the provisions of Section 607.0124 or 617.0124 acse Articles of Correction within 30 days of the file date of	4, Florida Statutes, this corporation files of the document being corrected.
hese articles of correction correct Articles of Incorpo	oration ment Type Being Corrected)
led with the Department of State on August 20,2013 (File Date of D	ment Type nemig Corrected)
pecify the inaccuracy, incorrect statement, or defect:	
article 1 - Name Slimlife Science, Inc.	
	•
orrect the inaccuracy, incorrect statement, or defect: hould be Slim Life Science, Inc.	
	<u> </u>
(Signature of a director, president or other officer - if not been selected, by an incomporator - if in the hand other court appointed fiduciary, by that fiduciary.)	directors or officers have ds of the receiver, trustee, or
latasha Waite	Secretary
(Typed or printed name of person signing)	(Title of person signing)

Filing Fee: \$35.00