## P140000004139

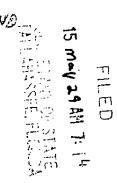
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## COVER LETTER

TO: Amendment Section

Division of Corporations			
SUBJECT: CISEF CAPITAL INC.			
DOCUMENT NUMBER: P14000	one of Corporation 004139		
The enclosed Articles of Correction and fee	are submitted for filing.		
Please return all correspondence concerning	g this matter to the following:		
LLAMAR DEVROV	V		
Name of Contact Person			
Finn/Company			
2331 E LAKE MIRAMAR CIRCLE			
Address			
MIRAMAR, FL. 33025			
City/State and Zip Code			
cisef.capital@gmail.com  E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
LLAMAR DEVROW	at (		
Name of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check for the following amou	nt:		
\$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		
	Certified Copy		
Mailing Address:	Street Address:		
Amendment Section	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 CISEF CAPITAL INC. Name of Corporation as currently filed with the Florida Dept. of State P14000004139 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. Articles of Amendment These articles of correction correct (Document Type Being Corrected) 05/04/2015 filed with the Department of State on\_ (File Date of Document) Specify the inaccuracy, incorrect statement, or defect: The statement made for the Effective Date of the amendment was typed as N/A. Correct the inaccuracy, incorrect statement, or defect: The Effective Date for the amendment should say: 05/15/2015 (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.)

Filing Fee: \$35.00

(Title of person signing)

LLAMAR DEVROW (Typed or printed name of person signing)