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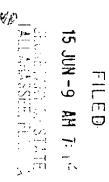
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: SILMON WRITING &	ie or corporation
DOCUMENT NUMBER: P15000	0047732
The enclosed Articles of Correction and fee	are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Stephen Simone Name of Contact Person	C PA
Stephen Simone,	P.A.
6439 Central Love	<u>. </u>
St Petersburg City/State and Zip Code	FL 33710
Jon Silman & Gmail. C E-mail address: (to be used for future annual repo	tr notification)
For further information concerning this matt	er, please call:
Stephen Simone Name of Contact Person	at (727) 341-0272 Area Code & Daytime Telephone Number
Enclosed is a check for the following amour	
\$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

SILMON WRITING & EDITING INC
Name of Corporation as currently filed with the Florida Dept. of State
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 Name Company Spelling
filed with the Department of State on (File Date of Document) (Document Type Being Corrected) (File Date of Document)
Specify the inaccuracy, incorrect statement, or defect:
The spelling of the company name
18 SHEMANS WRITING & EDITING INC.
(not silhau)
Correct the inaccuracy, incorrect statement, or defect: Please correct the name spelling to:
SILMAN WRITING & EDITING INC
(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.)
Stephen Simone CPA Registered Agent (Typed or printed name of person signing) Registered Agent

Filing Fee: \$35.00