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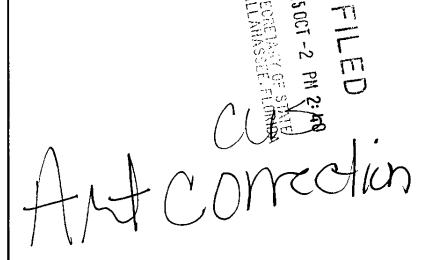
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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: Signoloist	<u> </u>		
DOCUMENT NUMBER: ¥\500	DO 18009		
The enclosed Articles of Correction and fee are submitted for filing.			
Please return all correspondence concerning this matter to the following:			
Name of Contact Person			
Signologist Inc	<u>t</u>		
922 NE 33rd Terrall			
Cape Co (a) FL City/State and Zip Code	33909		
E-mail address: (to be used for future annual repo	ort notification)		
For further information concerning this matter, please call:			
Name of Contact Person	at (954) 520 - 369 \ Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount	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		
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 For
ARTICLES OF CORRECTION For Signal State Name of Corporation as currently filed with the Florida Dept. of State Discoursest 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 (Document Type Being Corrected)
filed with the Department of State on September 31, 2015
Specify the inaccuracy, incorrect statement, or defect:
Name of business: Signalaist Inc.
Correct the inaccuracy, incorrect statement, or defect:
Name of business: Signalogist 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.)

Filing Fee: \$35.00

(Typed or printed name of person signing)