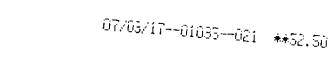
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COVER LETTER

TO: Amendment Section Division of Corporations

5 5 7 6 1	
SUBJECT: D.D.T. Contrac	me of Corporation
DOCUMENT NUMBER: Phooa	
The enclosed Articles of Correction and fee	are submitted for filing.
Please return all correspondence concerning	this matter to the following:
Mark D DAU. S Name of Contact Person	
D.D.I. Contractors	
85217 Johnson Li	<u>\</u>
85217 Johnson Li Address Vullee BC 3209 City/State and Zip Code	
E-mail address: (to be used for future annual repo	
For further information concerning this mat	ter, please call:
Arlane E y Caste Name of Contact Person	at (904) 233-734(Sec
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

D.D.L. (Untig CtVT) INC

Name of Corporation as currently tiled with the Flonda Dept. of State

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

Sec. Of Corp.

(Document Type Being Corrected)

filed with the Department of State on (Melle Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

INCLUDE AFIENE E. Yeasle AS

Sec. Of DDL Contractors (NC)

Correct the inaccuracy, incorrect statement, or defect:

Ontractors Dix

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.)

(Typed or printed name of person signing)

(Title of person signing)

Filing Fee: \$35.00