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COVER LETTER

Division of Corporations Kiwi Logistics, Inc. SUBJECT: Name of Corporation DOCUMENT NUMBER:_ The enclosed Articles of Correction and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Katic Ruri Name of Contact Person Kiwi Logistics, Inc. Firm/Company 1320 Myrtle Dr. Address Longwood, FL 32750 City/State and Zip Code katie@kiwilogisticsine.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Katie Ruri Enclosed is a check for the following amount: ☐ \$43.75 Filing Fee & Certificate of Status ■ \$35.00 Filing Fee □ \$43.75 Filing Fee & Certified Copy ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy

Mailing Address:

TO:

Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF CORRECTION

For

| Kiwi Logistics, Inc. | |
|---|--------------------------|
| Name of Corporation as currently filed with the Florida Dept | , of State |
| P20000053206 | |
| Document Number (if known) | |
| Pursuant to the provisions of Section 607.0124, Florida Statutes. | |
| · | |
| These articles of correction correct Articles of Incorporation (Document Type B | Being Corrected) |
| filed with the Department of State on 7/13/2020 (File Date of Document) | |
| Specify the inaccuracy, incorrect statement, or defect: Article VII | |
| Title: VP | |
| Katie P. Ruri | · · · 2 |
| 1320 Myrtle Dr., Longwood, FL. 32750 US | 020 / |
| | |
| | 5,2 1 |
| | |
| Correct the inaccuracy, incorrect statement, or defect: Article VII | D STATE STATE |
| Title: VP | |
| Adam P. Ruri | |
| 1320 Myrtle Dr., Longwood, FL, 32750 US | |
| | · |
| | |
| (Signature of Sidirector, president or other officer - if directors or not been selected, by an incorporator - if in the hands of the recoolther court appointed fiduciary, by that fiduciary.) | |
| Katie G. Ruri | President |
| (Typed or nanted name of person signing) | (Title of person suming) |

Filing Fee: \$35.00