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COVER LETTER

TO:

Amendment Section **Division of Corporations**

SUBJECT: Change of Address for Principal Officer (Pres/CEO) DOCUMENT NUMBER: P20000081748 The enclosed Articles of Correction and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Victor W Cabot Name of Contact Person Gryphon, Inc. Firm Company 6666 Odana Rd. Address Madison, WI 53719 City/State and Zip Code gryphonvi@gmail.com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Victor W Cabot at (<u>619</u> Name of Contact Person Enclosed is a check for the following amount: S35.00 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: Street Address: **Amendment Section** Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF CORRECTION

For

FILED

Cambra Inc	2022 APR -4 PH 3: 26
Gryphon, Inc. Name of Corporation as currently filed with the Florida Dept. of State	SECRE: 1 (7 STATE TALLAHASSEE, FL
P20000081748 Document Number (if known)	MECAHASSEE, FL
Pursuant to the provisions of Section 607.0124, Florida Statutes.	
These articles of correction correct ARTICLES OF INCORPORATION (Document Type Being Corrected)	·
filed with the Department of State on March 22, 2022 (File Date of Document)	
Specify the inaccuracy, incorrect statement, or defect:	
defect is this address for principal officer (President): 5318 Milward Dr., Madison, WI 5371	1
Correct the inaccuracy, incorrect statement, or defect:	
change incorrect address for principal officer (President) to: 6666 Odana Rd. #291, Madisor	n, WI 53719
	·
	<u> </u>
(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 coun appointed fiduciary, by that fiduciary.)	
Vistor W Cohot	•
Victor W Cabot President (Typed or printed name of person signing) (T	itle of person signing)

Filing Fee: \$35.00