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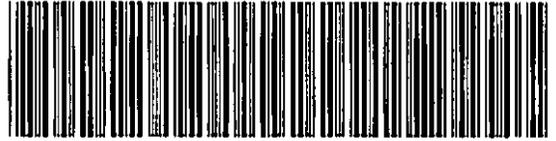
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TALLAHASSEE, FLORIDA

DEC 12 2022  
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## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** ALDE LOGISTICS INC  
Name of Corporation

**DOCUMENT NUMBER:** P22000063361

The enclosed Articles of Correction and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DARSHANI LOKHNATH  
Name of Contact Person

ALDES LOGISTICS INC  
Firm/Company

4111 NEPTUNE RD  
Address

SAINT CLOUD, FL 34769  
City/State and Zip Code

REALTORSHANI@GMAIL.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DARSHANI LOKHNATH at ( 786 ) 925-7708  
Name of Contact Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> \$35.00 Filing Fee       | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status                 |
| <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy | <input type="checkbox"/> \$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  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF CORRECTION**

For

ALDE LOGISTICS INC

\_\_\_\_\_  
Name of Corporation as currently filed with the Florida Dept. of State

P22000063361

\_\_\_\_\_  
Document Number (if known)

Pursuant to the provisions of Section 607.0124, Florida Statutes.

These articles of correction correct ARTICLES OF INCORPORATION (ARTICLE 1)  
(Document Type Being Corrected)

filed with the Department of State on 08/10/2022  
(File Date of Document)

Specify the inaccuracy, incorrect statement, or defect:

THE NAME OF THE COMPANY IS MISSING THE LETTER S ON THE FIRST WORD OF THE  
COMPANY'S NAME ( ALDE LOGISTICS INC)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Correct the inaccuracy, incorrect statement, or defect:

THE CORRECT NAME IS: ALDES LOGISTICS 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.)

DARSHANI LOKHINATHI  
(Typed or printed name of person signing)

VICE PRESIDENT  
(Title of person signing)

**Filing Fee: \$35.00**

2022 SEP -6 AM 10: 08  
FLORIDA