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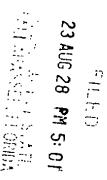
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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: XACT PROOU	CHS INC me of Corporation
DOCUMENT NUMBER: P 23	20006 1159
The enclosed Articles of Correction and fee	are submitted for filing.
Please return all correspondence concerning	g this matter to the following:
Bong Roem	EN
XACT PROOU	cts INC
6151 WEST SHORE	SRD
Hemma ISLAM City/Share and Zip Code	D. 19 32003
STGNS AND MOREOF	ort notification)
For further information concerning this mat	ter, please call:
ROONEY ROGMEN	at (904) 343-8040 Area Code Daytime Telephone Number
Enclosed is a check for the following amou	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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF CORRECTION

For

FILED

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XACT PRODUCTS INC Name of Corporation as currently filed with the Florida Dept. of	23 AUG 28 PM 5: ()
P 2 3 00 00 6 1159 Document Number (if known)	PATTE AND STATE	E)A
Pursuant to the provisions of Section 607.0124, Florida Statutes.		
These articles of correction correct ARHOLES OF DWCO	ng Corrected),	
filed with the Department of State on August 21 202	3	
Specify the inaccuracy, incorrect statement, or defect:		
TITLE UP		
ROONEY & ROEMER	 	
6151 WEST SHONES RA		
Flem Iny ISLAND FI 3200	3	
Correct the inaccuracy, incorrect statement, or defect: TIRE VP BENEE E ROEMER 6151 WEST SHORES RD		
Flemong ISLAND, F1 3200:	3	

(Signature of a director, president or other officer - if directors or of not been selected, by an incorporator - if in the hands of the receive other court appointed fiduciary, by that fiduciary,)	ficers have	
ROONES KROEMINTR	(Title of person signing)	

Filing Fee: \$35.00