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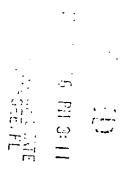
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| Special Instructions to Filing Officer. | | | | | |
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Office Use Only



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COVER LETTER

| TO: | Amendment Section Division of Corporations | | |
|--------|---|--|---|
| SUBJ | ECT: Dark Recon Solutions Inc. | ime of Corporation | |
| DOC | UMENT NUMBER: P24000045435 | | |
| The e | nclosed Articles of Correction and fee | are submitted (| for filing. |
| Please | e return all correspondence concerning | g this matter to | the following: |
| Angeli | ia St. Germain Name of Contact Person | | _ |
| Dark I | Recon Solutions Inc | · • | - |
| 6881 F | Rich Rd Address | | _ |
| North | Fort Myers, FL, 33917 City/State and Zip Code | | _ |
| Angel | ia@darkreconsolutions.com E-mail address: (to be used for future annual rep | port notification) | _ |
| For fi | arther information concerning this ma- | tter, please call: | |
| James | Byrd Name of Contact Person | at (754 Code |) 229-5919 Daytime Telephone Number |
| | | | 20,, |
| Enclo | sed is a check for the following amou | int: | |
| □ \$3 | 5.00 Filing Fee | ☐ \$43.75 Filing Fee & Certificate of Status | |
| □ \$4 | 3.75 Filing Fee & Certified Copy | ■ \$52.50 Filing Fee, Certificate of Status & Certified Copy | |
| | Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassec, 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

| Dark Recon Solutions Inc | |
|--|-------------------------------------|
| Name of Corporation as currently filed with the Florida Dept. | , of State |
| P24000045435 | |
| Document Number (if known) | |
| Pursuant to the provisions of Section 607.0124, Florida Statutes. | 3 |
| • | : |
| These articles of correction correct Physical Address (Document Type B) | Jeing Corrected) |
| filed with the Department of State on July 8, 2024 | ်းကို ကား . |
| (File Date of Document) | Sign Part |
| Specify the inaccuracy, incorrect statement, or defect: | <u>ြုံငုံ</u> ယ 🍑 |
| Physical address for doing business. | |
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| Correct the inaccuracy, incorrect statement, or defect: | |
| Physical address of Dark Recon Solutions Inc. is below | |
| 6881 Rich Rd. | |
| 0881 RICH Rd. | |
| North Fort Myers, FL. 33917 | |
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| The Control of the Co | |
| (Signifure of director, president or other officer - it directors or not been selected, by an incorporator of in the hands of the rece | officers have eiver, trustee, or |
| other court appointed fiduciary, by that fiduciary.) | |
| | |
| James O. Byrd Jr. | President |
| (Typed or printed name of person signing) | (Title of person signing) |

Filing Fee: \$35.00