# PPBWSP19

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddress)	<del></del>
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
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And

SEP 30 2013

R. WHITE



September 18, 2013

MAYUMI TODD TODDS ACCOUNTING SERVICES INC 9900 SW 168TH STREET SUITE 1 MIAMI, FL 33157 US

SUBJECT: DIGITAL DA VINCI TRADING INC

Ref. Number: P12000078794

We have received your document for DIGITAL DA VINCI TRADING INC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 613A00021903

Rebekah White Regulatory Specialist II

www.sunbiz.org



### FLORIDA DEPARTMENT OF STATE Division of Corporations

September 18, 2013

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Rebekah White Regulatory Specialist II

Letter Number: 613A00021903

Thank you.

Please just change principal office address +

Mo change mailing address, and officer's address. No change for Registered aget

Mayum: Todd

Thank you

Mayum: Todd

305 233 6551

www.sunbiz.org

# **COVER LETTER**

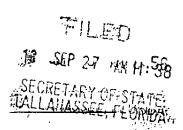
**TO:** Amendment Section Division of Corporations

NAME OF CORPORAT	TION: DIGITAL D	A VINCI TRADII	NG INC
DOCUMENT NUMBER	<sub>:</sub> P1200007879	4	
The enclosed Articles of A	Imendment and fee are su	bmitted for filing.	
Please return all correspor	ndence concerning this ma	tter to the following:	
M	AYUMI TODD		
	ODDS ACCOU	Name of Contact Person	
Firm/ Company			
9900 SW 168TH STREET SUITE 1  Address			
М	IAMI FL 33157	Address	
<del></del>		City/ State and Zip Code	<b>)</b>
INFO	@TODDACCO		
	E-mail address: (to be us	ed for future annual report	notification)
For further information co	ncerning this matter, pleas	se call:	
MAYUMI TODI	כ	at (305	, 233-6551
Name of C	ontact Person		de & Daytime Telephone Number
Enclosed is a check for th	e following amount made	payable to the Florida Depa	rtment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	Address ment Section		Address ment Section

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

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

#### **Articles of Amendment** to Articles of Incorporation of



# DIGITAL DA VINCI TRADING INC

(Name of Corporation as currently filed with the Florida Dept. of State)

ment(s) to

ration (if known)
es, this Florida Profit Corporation adopts the following amer
<u>ion:</u>
The poration," "company," or "incorporated" or the abbrevic," or "Co". A professional corporation name must contain iation "P.A."
20-5-603 FUNAIRIHONMACHI
NAKA-KU HIROSHIMA-SHI
HIROSHIMA JAPAN 730-0843
20-5-603 FUNAIRIHONMACHI
NAKA-KU HIROSHIMA-SHI
HIROSHIMA JAPAN 730-0843
ce address in Florida, enter the name of the address:
<del></del>
orida street nddress)
(City) , Florida (Zip Code)
(City) (Zip Code)
Agent: miliar with and accept the obligations of the position.
mittar with and accept the obligations of the position.
stered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V= Vice President; T= Treasurer; S= Secretary; D= Director; TR= Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	PT J	ohn Doe		
X Remove	<u>v</u> <u>n</u>	Mike Jones		
X Add	<u>sv</u> <u>s</u>	Sally Smith	•	
Type of Action (Check One)	<u>Title</u>	Name	Address	
1) X Change	CEO	MITSUHIRO KOYANAGI	20-5-603 FUNAIRIHONMACHI	
Add		·	NAKA-KU HIROSHIMA-SHI	
Remove			HIROSHIMA JAPAN 730-0843	
2) Change			<del> , </del>	
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add	·	· ,	· · · · · · · · · · · · · · · · · · ·	
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

If amending or adding additional Artic Attach additional sheets, if necessary).	(Be specific)	
· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·
<del></del>		
	<u> </u>	
if an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,	
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:	
	·	
,		

The date of each amendment(s) addate this document was signed.		, if other than th
Effective date <u>if applicable</u> :	·	
mappineasie.	(no more than 90 days after amendment file date)	<del></del>
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(s) flicient for approval.	
	proved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	·
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated_8/30/	2013	
selected	rector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court led fiduciary by that fiduciary)	<del></del>
	ROCK TODD	
	(Typed or printed name of person signing)	_
	Secretary	
	(Title of person signing)	_

# **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: DIGITAL D	A VINCI TRADI	NG INC
DOCUMENT NUM	BER: P1200007879	)4	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	MAYUMI TODD		
	TODDO AGOOU	Name of Contact Person	
	TODDS ACCOU	· · · · · · · · · · · · · · · · · · ·	ES INC
	0000 014/400714	Firm/ Company	• 4
	9900 SW 168TH	<del>-</del>	: 1
	MIAMI FL 33157	Address	
		City/ State and Zip Code	e
ini	FO@TODDACCO	UNTING.COM	
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	
MAYUMI TODD		at (305	233-6551
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check fo	or the following amount made	payable to the Florida Depa	urtment of State:
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	iling Address		Address
Amendment Section		Amendment Section	

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

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301