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Division of Corporations

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From:

Account Name : LAW OFFICES OF PAUL R. SASSO

Account Number : I20170000049 Phone : (305)234-2586 Fax Number : (305)234-2584

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DOLCE LATO, INC.

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COYER LETTER

Division of Con				
NAME OF CORPO	DRATION: DOLCE LATO	INC.		
	IBER: P13000066242			
The enclosed Article	s of Amendment and fee are	submitted for filing.		
Please return all corr	espondence concerning this n	natter to the following:		
	Paul R. Sasso, Esq.			
		Name of Contact Pers	on	
	Law Offices of Paul R. S.	8990		
	-	Firm/ Company		
	12384 SW 82nd Avenue			
	•	Address		
	Pinecrest, FL 33156			
		City/ State and Zip Co	de	
prsla	w@msn.com			
-		used for future annual repor	Protification	
	(- , , , , , , , , , , , , , , , , , , , 	Tot Tatale allitual (EDO)	moncadod)	
For further information	n concerning this matter, plea	se call:		
Paul R. Sasso		305	234-2586	
Name o	of Contact Person		de & Daytime Telephone Number	
Enclosed is a check for	the following amount made	payable to the Florida Depa	urtment of State:	
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	D\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
	ing Address	Street .	Address	
	ion of Company	Amendment Section		
DIVIS P.O. I	ion of Corporations Box 6327	Division	n of Corporations	
	bassee, FL 32314	Clifton Building 2661 Executive Center Circle		
	-, 		secutive Center Circle	
			· · · · · · · · · · · · · · · · · · ·	

3056621067

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Articles of Amendment to Articles of Incorporation of

(Name	of Carporation as curren	atly filed with the Florida I	Part of Park 3	
P13000066242		TO A 17950 WITH TOE T-TOP-ION T	Jept 01 State)	
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 60 its Articles of Incorporation:	7.1006, Florida Statutes, th	s Florida Profit Corporation	n adopts the following am	endment(s) to
A. If amending name, enter the new r	name of the corporation:			
name muss be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associations	MARON COPD. "Ne ne	"Co" A professional some		new riation in the
B. <u>Enter new principal office address</u> Principal office address <u>MUST BE A S</u>	if applicable: TREET ADDRESS)			
			<u> </u>	
S Frederica - Director Administration				
C. Enter new mailing address, if appl (Mailing address MAY BE A POST	<u>ICABIE:</u> OFFICE BOX)			
). If amending the registered agent an new registered agent and/or the new	d/or registered office add	ress in Florida, enter the n	ame of the	_
Name of New Registered Agent	Paul R. Sasso , £59	-		
Name of New Registered Agent	12384 SW 82nd Avenue			
		rees address)		
Man De Care de Come de Co	Pinecrest	eei uuuress)	22456	
New Registered Office Address:		(City)	_, Florida	<u> </u>
		107		
ew Registered Apent's Signature, if chiereby accept the appointment as registe	anging Registered Agent:	i. vith and accept the obligation	3 22 Asy 6 Asset.	TICTO
	Signature of New R	egistered Agent, if changing	A 9 28	Ö

PAGE 04/06

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 afficer/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.

Example:

X Change	<u>PT</u>	John Doe	
X Remove	¥	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
l) X Change	PD	Zachary Barbara	1124 11 Street
Add			Palm Harbor, FL 34683
Remove			
2) Change	VSTD	Leila Barbara	1124 11 Street
X Add			Palm Harbor, FL 34683
Remove			
3) Change			
Add		·	
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove		•	
6)Change			
Add			
Remove			

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•	icles, enter change(s) here: (Be specific)
-	
n amendment provides for an excha-	nge, reclassification, or cancellation of issued shares,
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in amendment provides for an exchanovisions for implementing the amend (if not applicable, indicate N/A)	nge, reclassification, or cancellation of issued shares, dment if not contained in the amendment itself:
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	8/8/2018	1			ing ∰ ofther the bota
The dute of each amendments	(s) adoption:	.,			
date this discoment was signed.					
	8/8/2018				
Effective date if applicable:			<u> </u>		
	(np m	iore ihan 90 da <u>r</u>	s ofter amendme	nt file date)	
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ocument a effective date on the	Denominant of State's	records.			
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The state of the s	,		,		
"The number of votes ci	es for the amendments	e) wastweer suf	licient for anno	ni.	
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by				_ *	
	(Voting grou	sp)			
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The amendment(s) was/were a	idented by the incorpor	rators without d	archolder action	and shercholder	
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Signature	P. H. King	41/2			
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