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OCT 07 2016 R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: DBCSC INC.		
DOCUMENT NUMB			
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corresp	pondence concerning this ma	tter to the following:	
,	Jane A. Iacopucci		
-		Name of Contact Person	1
-		Firm/ Company	
]	P. O. Box 1132		
-	Jupiter, FL 33468-1132	Address	
-		City/ State and Zip Code	e
dwf20	13@yahoo.com		
	E-mail address: (to be u	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Jane A. Iacopucci		at (⁵⁶¹	889-2372
Name o	f Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	irtment 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)
Amer Divis P.O.	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section of Corporations Building xecutive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation

	of		16 UCT -3	10:11 KA
BCSC INC.			SECRETE:	
(<u>Name</u>	of Corporation as currently filed	l with the Florida		
6000072494				••••
	(Document Number of Corp	oration (if known)	~	······
orsuant to the provisions of section 607. SArticles of Incorporation:	1006, Florida Statutes, this <i>Floria</i>	la Profit Corporatio	n adopts the fi	oflowing amendment
If amending name, enter the new na	ame of the corporation:			
				The new
me must be distinguishable and con Corp.," "Inc.," or Co.," or the design ord "chartered," "professional associa	ation "Corp," "Inc," or "Co". tion," or the abbreviation "P.A."	A professional cor	poration name	must contain the
Enter new principal office address, rincipal office address <u>MUST BE A S</u>				
		<u> </u>		

Enter new mailing address, if appl (Mailing address MAY BE A POST)				
(Mauring aduress MAI BE A FOST)	UFFICE BUX)			,
				
			· -	
If amending the registered agent an new registered agent and/or the new		Florida, enter the	name of the	
new registered agent and/or the ne-	Anis, Tahmida Z.			
Name of New Registered Agent	Allis, Tallillida Z.		 -	
	(Florida street add	lress)		
New Registered Office Address:	15061 Jog Road, Delray Beach		. Florida	33446
	(City)			(Zip Code)
	,			• •
ew Registered Agent's Signature, if c				
hereby accept the appointment as regist	ered agent. I am familiar with ai	id accept the obliga	tions of the po	sition.
	Tarmida Aaris			

Signature of New Registered 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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P	Shell, Kobita	15061 Jog Road
Add _X Remove			Delray Beach, FL 33446
2) Change	P	Anis, Tahmida Z.	15061 Jog Road
XAdd			DEIRNY BEACH, FL 33446
Remove			
3) Change			
Add			
Remove			
4) Change	<u></u>		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Damaya			

Attach additional sheets, if necessary).	(Be specific)		
<u> </u>			
<u> </u>			
			
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		**	
f an amendment provides for an exch	ange, reclassification, or can	cellation of issued shares,	
<u>provisions for implementing the ame</u>	ange, reclassification, or can adment if not contained in th	cellation of issued shares, e amendment itself:	
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ange, reclassification, or can adment if not contained in th	<u>cellation of issued shares,</u> <u>e amendment itself:</u>	
<u>provisions for implementing the ame</u>	ange, reclassification, or can ndment if not contained in th	cellation of issued shares, e amendment itself:	
<u>provisions for implementing the ame</u>	ange, reclassification, or can adment if not contained in th	cellation of issued shares, e amendment itself:	
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<u>provisions for implementing the ame</u>	ange, reclassification, or can	cellation of issued shares, e amendment itself:	

The date of each amendment(s) adoption:	if other than the
Effective date if applicable:	
(no more than 90 days after amendment file date)	···
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	t be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
9/23/2016 Dated	
Signature Janonida Aans	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Tahmida Z. Anis	
(Typed or printed name of person signing)	
President	
(Title of person signing)	