## P180000 81760

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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: DET MANAGEM	ENT, INC	·····
DOCUMENT NUMBI	ER:	· · ·	
	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	ondence concerning this ma	tter to the following:	
Ĥ	RODRIGO POSADA		
_		Name of Contact Persor	1
(	RUSHOFF & POSADA		
-	<del></del> -	Firm/ Company	
6	991 W BROWARD BLVD		
		Address	
F	PLANTATION, FL 33317		
_		City/ State and Zip Code	8
E7E!!	EINC@GMAIL.COM		
<u> </u>	•	sed for future annual report	antification)
	E-man address; (to be de	sed for future animal report	notification)
For further information	concerning this matter, pleas	se call:	
RODRIGO POSADA		954 at (	316-2590
Name of	Contact Person		de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment 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)
Mailing Address			Address
	idment Section	Amendment Section	
Division of Corporations		Division of Corporations	
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

DET MANAGEMENT (Name of Corporation as currently filed with the Florida Dept. of State) P18000081760 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendn its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain th word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. 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, no 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; CEC Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of echeld. 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. 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 Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>РТ</u>	John Do		
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>SV</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	P		HENRY TORRES	5807 TYLER ST
Add		_		HOLLYWOOD, FL 33021
X Remove				
2) Change				
		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		· <del></del>		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add			<del>.</del>	
Remove				

	amending or adding additional Articles, enter change(s) here: tach additional sheets, if necessary). (Be specific)
	an amendment provides for an exchange, reclassification, or cancellation of issued shares,
Đ	rovisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)
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<u>-</u>	(у на иррасияе, такие 1974)
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	(y noi appacaine, maccae 1974)

The date of each amendment(s) date this document was signed.	09/26/2019 adoption:	, if other
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date with Department of State's records.	ill not be list
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
☐ The amendment(s) was/were a must be separately provided j	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	······································	
	(voting group)	
The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder	
09/26/20		
Dated		
Signature	Amily	
	a director, president or other officer – if directors or officers have not been	<del></del>
	eted, by an incorporator – if in the hands of a receiver, trustee, or other court	
appo	ointed fiduciary by that fiduciary)	
	HERNRY TORRES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	