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Name Charage

JUL 02 2014 T. CARTER

COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: The Dorte	in Jason Group of Tampe Ine
DOCUMENT NUMBER: 5/9353	<u> </u>
The enclosed Articles of Amendment and fee are subm	nitted for filing.
Please return all correspondence concerning this matter	r to the following:
JEANA	Name of Contact Person
	Tampa Inc Firm/Company
471.	Firm/Company Rosa Koranis Avenue
	Bosphorans Avenue Address The Fig. 33606 City/ State and Zip Code
Ton	mpa FI 33606
,	City/ State and Zip Code
1 1050	o C DJ G tampa, com I for future annual report notification)
E-mail address! (to be used	I for future annual report notification)
For further information concerning this matter, please	call:
Jeannette Jason	at (813) 254 - 4900 Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made pa	yable to the Florida Department of State:
\$35 Filing Fee Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address	Street Address
Amendment Section Division of Corporations	Amendment Section
P.O. Box 6327	Division of Corporations Clifton Building
Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

Articles of Inco	rporation	
The Doran Jason Gro (Name of Corporation as currently filed with the Flo		
5 19 35		
(Document Number of Corporation (if		•
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following	g amendment(s) to
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation"		The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Cword "chartered," "professional association," or the abbreviation "IB. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Co". A professional corporation name must o	contain the
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) SAME	476 Bosphoras A Tompe F2 336	-
D. If amending the registered agent and/or registered office address: Name of New Registered Agent		
New Registered Office Address: (City)	eet address), Florida(Zip Code)	SEGATIVELY TALL JUH 25

Signature of New Registered Agent, if changing

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.

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	<u>Addres</u> s
1) Change			
Add Remove			
2) Change			
Add Remove			
3) Change			- me
Add			5000
4) Change			
Add Remove			
5) Change		_	
Add Remove			
6) Change		_	
Add			
Remove			

amending or adding additional Artic tach additional sheets, if necessary).	(Be specific)
	Δ
	/ /
A VV	
/	
	
•	
ovisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	0 /
m	\mathcal{L}
C BM	<u>/</u>
Sam	<u>/</u>

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	<u>.</u>
(no more than 90 days after amendment file date)	
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"	
(voting group)	
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.	
Dated 6/25/2014	
Signature	<u> </u>
(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)	
JEANNETTE JASON	
SEANNETTE JASON (Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	