47274

<u> </u>	
(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT M	IAIL
(Business Entity Name)	
(Document Number)	
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COVER LETTER

	<u>COVER LETTER</u>	
TO: Amendment Section Division of Corporations		191 SEP 18 7 9 6
NAME OF CORPORATION: DESIGN CO	MPUTER SYSTEMS, INC.	3
DOCUMENT NUMBER: L47274		· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of Amendment and fee	 are submitted for filing. 	(22 4
Please return all correspondence concerning th	isimatter to the following:	
DANA K. WILLIAMS		
DESIGN COMPUTER	Name of Contact Person SYSTEMS, INC.	
1818 NORTH J TERR.	Firm/ Company	
LAKE WORTH, FL 33	Address	
dana_w@designcomputer.com	City/ State and Zip Code	
	be used for future annual report notification)	
For further information concerning this matter	. please call:	
DANA K. WILLIAMS	at () 707-6514	
Name of Contact Person	Area Code & Daytime Telephone Number	_
Enclosed is a check for the following amount i	nade payable to the Florida Department of State:	
■ \$35 Filing Fee □\$43.75 Filing Fe Certificate of Sta		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

Articles of Amendment to Articles of Incorporation of



DESIGN COMPUTER SYSTEMS, INC.

(Name of Corporation a	s currently filed with the Florida Dept. of State)
1.47274	~
Document	Number of Corporation (if known)
Pursuant to the provisions of section 607.1006. Florida Statis Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	
	The new corporation," "company," or "incorporated" or the abbreviation lnc," or "Co". A professional corporation name must contain the reviation "P.A."
B. Enter new principal office address, if applicable:	1106-A NORTH G STREET
(Principal office address <u>MUST BE A STREET ADDRE</u>	LAKE WORTH, FL 33460
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	ISIS NORTH J TERRACE
	LAKE WORTH, FL 33460
D. If amending the registered agent and/or registered onew registered agent and/or the new registered officers.	
new registered agent and/or the new registered one	C JARTI CSS.
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registe	rod Agent:
I hereby accept the appointment as registered agent. I an	
	e 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; CEO^* 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 ETD.

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: XChange	<u>PT</u>	John Doe			
X Remove	<u>Y</u>	Mike Jones	1		
_X Add	<u>sv</u>	Sally Smith	<u> </u>		
Type of Action (Check One)	<u>Title</u>	<u>Na</u>	<u>ame</u>		Address
11 Change	VP	Po	 nmells, Malika 		1451 West Cypress Creek Road
Add					Fort Lauderdale, FL 33309
X Remove					
2) Change			1		
Add					
Remove					
3) Change					
Add					
Remove					
4) Change					
Add			ļ		
Remove					
51 Change	-n =.				
Add					
Remove					
6)Change					
Add					
Remove					

F. If amending or adding additional Articles	conter change(s) here
(Attach additional sheets, if necessary). (L	Be specific)
· · · · · · · · · · · · · · · · · · ·	
	!
h. It an amendment provides for an exchang provisions for implementing the amendment	ent if not contained in the amendment itself:
(if not applicable, indicate NA)	
	<u> </u>

· .·	
The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Note: If the date inserted in this block does no document's effective date on the Department of S	t meet the applicable statutory filing requirements, this date will not be listed as the state's records.
Adoption of Amendment(s) (<u>CHE</u>	ECK ONE)
The amendment(s) was/were adopted by the sl by the shareholders was/were sufficient for ap	hareholders. The number of votes cast for the amendment(s) oproval.
	shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
The number of votes east for the americ	lment(s) was/were sufficient for approval
by	ng group)
	oard of directors without shareholder action and shareholder
action was not required.	acorporators without shareholder action and shareholder
Dated	na K. Ulik 9/6/2017
(By a director, presid	lent or other officer – if directors or officers have not been porator – if in the hands of a receiver, trustee, or other court by that fiduciary)
DANA K. W	/ILLIAMS
 (1	yped or printed name of person signing)
PRESIDEN	†
	(Title of person signing)