## M49870

(Re	questor's Name)			
(Ad	dress)	·		
(Ad	dress)			
(Cit	y/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Business Entity Name)				
(Do	cument Number)			
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				





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SION OF CORPORATIONS

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPORATION: DEN	BIGH CORPOR	AMON
DOCUMENT NUMBER: M49	870	
The enclosed Articles of Amendment and fee a	are submitted for filing.	
Please return all correspondence concerning th	is matter to the following:	
Phillip J	. CLEMENTS	<b>&gt;</b>
DENBIUM	conforation	
	Firm/ Company	
1623 NW 8	Address	
DORAL FL	33126 City/ State and Zip Code	
Solomons (1) E-mail address: (to be use	ed for future annual report potification)	30m
For further information concerning this matter,	, please call:	
LOURDES SOLOMONS Name of Contact Person	·	1300 phone Number
Enclosed is a check for the following amount r	nade payable to the Florida Departi	ment of State:
\$35 Filing Fee \$\bigcup \$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 Amendment Section	Street Address Amendment Section	

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

YIIda Martinez COMMISSION FEE 023971 EXPIRES: OCT. 15, 2014 WWW.AARONNOTARY.com

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## **Articles of Amendment Articles of Incorporation**

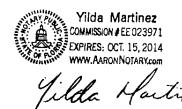
(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

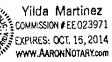
A. If amending name, enter the new name	of the corporatio	<u>n:</u>		
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pr	he designation "C	orp," "Inc," or "C	o". A professio	The new porated" or the onal corporation
B. Enter new principal office address, if an (Principal office address MUST BE A STRE		DOEAL 11993 V	FC FC	AUE
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF		1693 N 2050C 3313	W 84 FC	AVE
D. If amending the registered agent and/or			a, enter the nam	e of the
new registered agent and/or the new reg	Phillip	J. CLM NW 84		
New Registered Office Address:		ida street address)		33126
New Registered Agent's Signature, if change I hereby accept the appointment as registered	ging Registered A	gent:	,	of the position.
<b>-4</b>	Signature of New	Registered Agent, i	if changing	

Page 1 of 3



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)

<u>Title</u>	<u>e</u>	Name			<u>Address</u>			Type of Action
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Yilda Martinez

COMMISSION #EE 023971

EXPIRES: OCT. 15, 2014

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Lilda Watt