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R. HUNT 05/03/23

## **COVER LETTER**

TO: Amendment Section Division of Corporations

DRUFTKI DORAYTH INSTITUTION INC NAME OF CORPORATION:	
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
STEVEN LEVY	
(Name of Contact Person)	
B RILEY WEALTH	
(Firm/ Company)	
2875 NE 191 STREET SUITE 601	
(Address)	
AVENTURA, FL 33180	
(City/ State and Zip Code)	
SLEVY@BRIELYWEALTH.COM	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
STEVEN LEVY 305 692-5204 at	
(Name of Contact Person) (Area Code) (Daytime Telephone Nun	iber)
Enclosed is a check for the following amount made payable to the Florida Department of State:	
■ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee Certificate of Status  Certificate of Status (Additional copy is enclosed)	
Mailing Address Street Address	

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

## DRUFTKI DORAYTH INSTITUTION INC

(Name of Corporation as currently filed with the Flori N15000001890	da Dept. of State)		
	umber of Corporation (if kr	nown)	
Pursuant to the provisions of section 617.1006, Florida Stramendment(s) to its Articles of Incorporation:	atutes, this Florida Not Fo	r Profit Corporation adopts th	e following
A. If amending name, enter the new name of the corpo	oration:		
			The new
name must be distinguishable and contain the word "corp "Company" or "Co." may not be used in the name.	oration" or "incorporated	" or the abbreviation "Corp."	or "Inc."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u></u>		
		····	<u>~3</u>
		<u> </u>	.:: _ :=
C. Enter new mailing address, if applicable:		<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)		<u>ာနဂ</u> တ	<u>: ယ</u>
			1 <del></del>
		<u></u>	9.
D. If amending the registered agent and/or registered o	office address in Florida.	fr enter the name of the	<b>6</b> 6
new registered agent and/or the new registered offic	e address:		
Name of New Registered Agent:			
· · · · ·			
	(Flo	rida street address)	<del></del>
New Registered Office Address:			
		, Florida	
	(City)	(Zip Code)	
lew Registered Agent's Signature, if changing Register hereby accept the appointment as registered agent. I am	ed Agent: familiar with and accept th	he obligations of the position.	
	Signature of New Register	ed Agent, if changing	<del></del>

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: XChange X Remove X Add	PT         John D           V         Mike Je           SV         Sally S	ones	
Type of Action (Check One)	Title	Name	Address
1) Change Add	D	GARY GANI	1873 EAST 21 ST BROOKLYN NY 11229
Remove			
2) Change Add	<del></del>		
Remove 3) Change Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
<del></del>	additional Artic	cles, enter change(s) here: (Be specific)	
	· <del></del>		

<del> </del>		
		<del></del>
The date of each amendment(s) adoption date this document was signed.	on: MARCH 23, 2023	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	bes not meet the applicable statutory filing requirements, this date will no	ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)	

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

Dated Signatur	
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)  GARY GANI
	(Typed or printed name of person signing)
	(Typed or printed name of person signing)  DIRECTOR