## P000 000 19244

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
WES \$ 10.00				

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August 6, 2019

KIM LAMBERT 16426 SE 207TH ST HAWTHORNE, FL 32640

SUBJECT: D J'S ROOT SCOOTER, INC.

Ref. Number: P00000019244

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

THE FEE TO FILE AN AMENDMENT IS \$35.00. AN ADDITION \$10.00 IS DUE.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 819A00016098

Susan Tallent Regulatory Specialist II

www.sunbiz.org

## Articles of Amendment to Articles of Incorporation of

DI'S ROOT SCOOTER, INC.	
(Name of Corporation as	currently filed with the Florida Dept, of State)
P00000019244	
(Document N	Jumber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statits Articles of Incorporation:	ntes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpor	ation:
	The new
name must be distinguishable and contain the word "conform," "Inc.," or Co.," or the designation "Corp," "howord "chartered," "professional association," or the abbre	orporation." "company," or "incorporated" or the abbreviation nee," or "Co". A professional corporation name must contain the eviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	<u>S</u> )
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2019 AUG
D. If amending the registered agent and/or registered o new registered agent and/or the new registered offic	ffice address in Florida, enter the name of the eaddress:
Name of New Registered Agent	
<del></del>	Florida street address)
,	
New Registered Office Address:	(City) , Florida (Zip Code)
N. D. Stand American Circumstance Control of the Co	ad Avant
New Registered Agent's Signature, if changing Register Thereby accept the appointment as registered agent. Tam	familiar with and accept the obligations of the position.
Sim. store	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; 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 D	<u>oe</u>			
X Remove	<u>V</u>	Mike Jones				
X Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	Title		Name	Address		
1) Change	<u>v</u>		DONALD LAMBERT	16426 SE 207TH ST		
X Add		_		HAWTHORNE, FL 32640		
Remove						
2) Change		_				
Add						
Remove						
3) Change		<del></del>				
Add						
Remove						
4) Change		<del></del>				
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
		_				
Add Remove						

Attach additional sheets, if necessary),	icles, enter change(s) here:  (Be specific)
<del>-</del> -	
If an amendment provides for an eyeb	range, reclassification, or cancellation of issued shares,
provisions for implementing the amer	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	<del>-</del>

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date wildocument's effective date on the Department of State's records.	ll not be listed as the
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 east 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 7-29-19	
Dated	
(By a director, president of 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)	
, ,	
(Typed or printed name of person signing)	
President	
(Title of person signing)	_