P01000090039

(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:	•
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Requestor's Name)
(Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	
(City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Addross)
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	(Address)
PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies Certificates of Status	
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	(City/State/Zip/Phone #)
(Business Entity Name) (Document Number) Certified Copies Certificates of Status	
(Document Number) Certified Copies Certificates of Status	PICK-UP WAIT MAIL
(Document Number) Certified Copies Certificates of Status	
(Document Number) Certified Copies Certificates of Status	(Business Entity Name)
Certified Copies Certificates of Status	(Stomato Entry Hame)
Certified Copies Certificates of Status	
	(Document Number)
Special Instructions to Filing Officer:	Certified Copies Certificates of Status
Special Instructions to Filing Officer:	
Special instructions to Hiling Officer:	
	Special Instructions to Filing Officer:
I	





800160015158

08/28/09--01011--016 **43.75

09 AUG 28 PH 3: 52
SECRETARY OF STATE

Maller

COVER LETTER

TO: Amendment Section
Division of Corporations

	THE THE THE				
NAME OF CORPORATION: _	DLG ENGINEERING INC.				
DOCUMENT NUMBER:	P010000 900 3 9				
The enclosed Articles of Amendm	ent and fee are submitted for filing.				
Please return all correspondence co	oncerning this matter to the following:				
	RICARDO DE LA GUARDIA				
■ 1970 ■ *** *** **** *** *** *** *** *** ***	Name of Contact Person				
	OLG ENGINEERING				
Firm/ Company					
5631 SW 67 TH AVE					
Address					
S0U7	TH MIAMI, FL 33143				
	City/ State and Zip Code				
	DLGE@ BELL SOUTH. NET				
E-mail add	lress: (to be used for future annual report notification)				
For further information concerning	g this matter, please call:				
RICK DE LA GUARDI	A at (305) 665 - 9089				
Name of Contact Person	· · · · · · · · · · · · · · · · · · ·				
Enclosed is a check for the following	ing amount made payable to the Florida Department of State:				
\$35 Filing Fee \$43.75 Filin Certificate					
Mailing Address	Street Address				
Amendment Section	Amendment Section				
Division of Corporations	Division of Corporations				
P.O. Box 6327	Clifton Building				
Tallahassee, FL 32314	2661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation**

DLG ENGINFERING INC.

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

· ·	Articles of Amendm	ient		•	
	to			· 7 ₄	
	Articles of Incorpora	tion		<i>0</i> -	
	of			A.S. All A	
DLG ENGINFE	RING INC.			Alice Con Con	
(Name of Corporation as curre	ently filed with the Flo	rida Dept. of St	ate)	Aligh O	
P01000	0090039			ALLAND PASSES	
(Document Num	(Document Number of Corporation (if known)				
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	6, Florida Statutes, this	Florida Profit	Corporation	adopts the following	
A. If amending name, enter the new name of	f the corporation: ${\cal N}$	/A		The -new	
name must be distinguishable and contain in abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "pro	designation "Corp," "	'Inc," or "Co".	A professio		
•					
Principal office address <u>MUST BE A STREE</u> M/ k	<u>T ADDRESS</u>)				
Principal office address <u>MUST BE A STREE</u> M/A C. Enter new mailing address, if applicable	<u>T ADDRESS</u>)				
Principal office address <u>MUST BE A STREE</u> M/A C. Enter new mailing address, if applicable (Mailing address <u>MAY BE A POST OFFICE</u> N/A	ET ADDRESS) ECE BOX) Cegistered office address	ss in Florida, en	ter the nam	e of the	
Principal office address <u>MUST BE A STREE</u> N/A C. Enter new mailing address, if applicable (Mailing address <u>MAY BE A POST OFFICE</u> N/A D. If amending the registered agent and/or r	ET ADDRESS) ECE BOX) Cegistered office address	ss in Florida, en	ter the nam	e of the	
Principal office address MUST BE A STREE M/A C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE AND A POST OF FICE AN	ET ADDRESS) ECE BOX) Cegistered office address	N/A	ter the nam	e of the	
Principal office address MUST BE A STREE M/k C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE N/4 D. If amending the registered agent and/or renew registered agent and/or the new registered agent:	registered office address:	N/A et address)	_		
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE N/A) D. If amending the registered agent and/or renew registered agent and/or the new registered Agent:	ET ADDRESS) ECE BOX registered office address:	N/A et address)	ter the nam		
Principal office address MUST BE A STREE M/k C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFICE N/4 D. If amending the registered agent and/or registered agent and/or the new registered agent:	ET ADDRESS) ET ADDRESS ET ADDRESS ET ADDRESS ET ADDRESS ET ADDRESS FOR ADDRESS	N/A et address) (Zi	, Florida_ p Code)		

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>	Name	Address	Type of Action
ICE PRESIDENT	YIPING WANG	8225 SW 171 YERR	Add
		MIAMI, FL 33157	Remove
CE PRESIDENT	DR. WIMAL SUARIS	13800 SW 74 COURT MIAMI, FL 33158	Add
		MIMI, FL 33158	☐ Remove
			Add
			☐ Remove
E. If amending	or adding additional Articles, enter	rhange(s) here	
	ional sheets, if necessary). (Be specific		
- 17-1			
	dment provides for an exchange, recl for implementing the amendment if n		
	upplicable indicate N/A)		tsour.
	N	r/A	
-			
		and the same of th	
		<u> </u>	

The date of each amendment	t(s) adoption: 8-26-09
	(date of adoption is required)
Effective date if applicable:	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/we by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement and 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)
	(voting group)
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder
Dated	8-26-09 NOMO
Signature	W 11/10
(By	a director, president or other officer – if directors or officers have not been
	ected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	RICARDO DE LA GUARDIA
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)