P03000148325

(Re	equestor's Name)	
(Address)		
(Ad	dress)	
(Cit	ty/State/Zip/Phone	• #)
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(Do	cument Number)	
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SEGRETARY OF SINIE DIVISION OF CORPORATIONS

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORI	PORATION:	D C TECHNICAL SERV	/ICES INC
DOCUMENT NU	UMBER:		
The enclosed Artic	cles of Amendment and fe	ee are submitted for filing.	
Please return all co	orrespondence concerning	this matter to the following:	
		DAVID STEINFELD	
		Name of Contact Person	
	BROTHER A	AND SISTER ACCOUNTING	LLC
	- "	Firm/ Company	· · · · · · · · · · · · · · · · · · ·
	105	TANELLO DE CUITE COO	
	185	7 WELLS RD SUITE 208	
		Address	
	ORAN	GE PARK, FLORIDA 32073	
	Ol viii	City/ State and Zip Code	
		- -	
	BROTHERANDSIS	TERACCOUNTING@GMAIL	.COM
	E-mail address: (to be	used for future annual report notificati	ion)
For further informa	ation concerning this matt	er, please call:	
DA	VID STEINFELD	at (904)	272-3382
	of Contact Person		ne Telephone Number
Enclosed is a chec	k for the following amoun	nt made payable to the Florida D	epartment of State:
☑ \$35 Filing Fee	\$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 A	ddress	Street Address	
Amendment Section		Amendment Section	
Division of Corporations		Division of Corporation	s S
P.O. Box 6327		Clifton Building	
Tallahassee, FL 32314		2661 Executive Center	Circle

Tallahassee, FL 32301





August 8, 2011

DAVID STEINFELD
BROTHERS AND SISTERS ACCOUNTING LLC
1857 WELLS RD - SUITE 208
ORANGE PARK, FL 32073

SUBJECT: D C TECHNICAL SERVICES, INC.

Ref. Number: P03000148325

We have received your document for D C TECHNICAL SERVICES, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is a **PROFIT** corporation it must be signed by a director, president or 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.

If the corporation is a <u>NOT FOR PROFIT</u> corporation it must be signed 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.

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) 245-6964.

Irene Albritton Regulatory Specialist II

Letter Number: 011A00018593

Articles of Amendment to . Articles of Incorporation of

D C TECHNICAL SERVICES INC

(Name of Corporation as curren	AL SERVICES III		
	00148325	a pope of State	
	per of Corporation (if known	own)	
Pursuant to the provisions of section 607.1006, amendment(s) to its Articles of Incorporation:	Florida Statutes, this F	lorida Profit Corporation add	opts the following
A. If amending name, enter the new name of t	the corporation:		
			The new
name must be distinguishable and contain the abbreviation "Corp.," "Inc.," or Co.," or the a name must contain the word "chartered," "professional"	lesignation "Corp," "Inc	c," or "Co". A professional	'ed" or the corporation
B. Enter new principal office address, if appli	cable:		
(Principal office address <u>MUST BE A STREET</u>	(ADDRESS)		·e
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE D. If amending the registered agent and/or registered agent	gistered office address i	in Florida, enter the name of	11 AUG 23 PH 4: 08
new registered agent and/or the new regist	ered office address:		
Name of New Registered Agent:			
New Registered Office Address:	(Florida street d	address)	
_		, Florida	<u></u>
	(City)	(Zip Code)	
New Registered Agent's Signature, if changing I hereby accept the appointment as registered age Signature, if changing			he position.

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>Name</u>	Address	Type of Action
DIR	ROBERT K LINDSAY	2208 JOHN MORTON RD ORANGE PARK, FLORIDA 320	☑ Add ☑ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
	endment provides for an exchange, recl		
	s for implementing the amendment if rapplicable, indicate N/A)	iot contained in the amendment it	tself:
-			

The date of each amendmen	t(s) adoption: 8/0	04/2011
Effective date if applicable:		(date of adoption is required)
	(no more than 9	0 days after amendment file date)
Adoption of Amendment(s)	(<u>CH</u>	ECK ONE)
The amendment(s) was/we by the shareholders was/w		shareholders. The number of votes cast for the amendment(s) approval.
		e shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amend	dment(s) was/were sufficient for approval
by		.,,
	(voting group)	
The amendment(s) was/we action was not required.	ere 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_08/0)5/2011	De Dan II III
sel		ent or other officer – if directors or officers have not been corator – if in the hands of a receiver, trustee, or other court by that fiduciary)
	(Туј	DASUB STEINFELD DON CLASIC ped or printed name of person signing)
	(Title of	ACCOUNTANT PROSIDENT