## P060000 66996

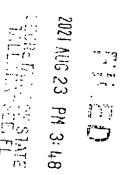
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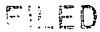
## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: DALVAR INC.		
DOCUMENT NUMI	P06000066996		<u> </u>
The enclosed Articles	of Amendment and fee are su	brnitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	RICARDO DALMAU		
	<del></del>	Name of Contact Person	
	DALVAR INC.		
		Firm/ Company	· · · · · · · · · · · · · · · · · · ·
	8306 MILLS DR. # 515		
		Address	
	MIAMI, FL 33183		
		City/ State and Zip Code	
	DALVAR@AOL.COM		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, pleas	305	299-1882
	of Contact Person	at (	299-1882 le & Daytime Telephone Number
	or the following amount made		•
□ \$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)
Amo Divi P.O	elling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Amend Divisio The Co	Address ment Section n of Corporations entre of Tallahassee I. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of



DALVAR INC.	
(Name of Corporat	ion as currently filed with the Florida (Dept) of State) Fil 3: 48
206000066996	NO DESCRIPTIONS
(Docur	ment Number of Corporation (if known) The Figure STATE
ursuant to the provisions of section 607.1006, Florid s Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the following amendment(s)
. If amending name, enter the new name of the c	orporation:
	The new
ame must be distinguishable and contain the word "c Inc.," or Co.," or the designation "Corp," "Inc, chartered," "professional association," or the abbre	orporation," "company," or "incorporated" or the abbreviation "Corp.," " or "Co". A professional corporation name must contain the word eviation "P.A."
<ol> <li>Enter new principal office address, if applicable</li> <li>Principal office address <u>MUST BE A STREET ADD</u></li> </ol>	
. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	<u></u>
. If amending the registered agent and/or registered new registered agent and/or the new registered	red office address in Florida, enter the name of the office address:
Name of New Registered Agent	
	(Florida street address)
Name Descriptions of Office Addresses	
New Registered Office Address:	, Florida (City) (Zip Code)
ew Registered Agent's Signature, if changing Reg hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept the obligations of the position.
, / //	the position.
Signa	nture of New Registered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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.

X Change	<u>PT</u> <u>Jo</u>	<u>phn Doe</u>	
X Remove	<u>v</u> <u>M</u>	fike Jones	
X Add	<u>SV</u> <u>S</u>	ally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Address</u>
1) Change	VS	SERGIO H. TAVERAS	8306 MILLS DR. # 515
Add			MIAMI, FL 33183
X Remove			
2) Change	VS	JANE E. HENDRICKS	6495 SW 84 ST.
X Add			OCALA, FL 34476
Remove 3) Change			
Add			<del></del>
Remove			
4) Change			
Add			<u> </u>
Remove			<u> </u>
5) Change		<u> </u>	
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if no	tional Articles, enter	change(s) here:		
(Attach additional sheets, if h	ecessary). (Be speci	μο)		
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. If an amendment provides f	or an exchange recla	estification or can	cellation of issued	thares
provisions for implementing	ig the amendment if i	not contained in th	e amendment itsel	<u>f:</u>
(if not applicable, indica	ate N/A)			
		<u>.</u>		
			<u> </u>	

	Nov. 1, 2013	
The date of each amendmen	t(s) adoption:	, if other than the
date this document was signed	<b>]</b> ,	
	Nov. 1, 2013	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, he Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without sharehol	der action and shareholder
	re adopted by the shareholders. The number of votes east for the amer ere sufficient for approval.	ndment(s)
	re approved by the shareholders through voting groups. The following ed for each voting group entitled to vote separately on the amendment	
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	"	
. —	(voting group)	
NOV Dated Signature _	1,2013 (Salary)	
<u>a</u>	By a director, president or other officer - if directors or officers have no	ot been
	elected, by an incorporator - if in the hands of a receiver, trustee, or other	
	ppointed fiduciary by that fiduciary)	
	RICARDO DALMAU	
	(Typed or printed name of person signing)	
	PRESIDENT AND TREASURER	
	(litle of person signing)	