

PO6000107321

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

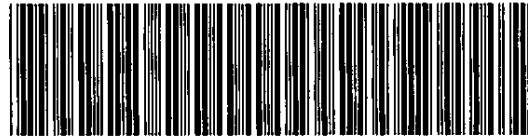
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

LT
6-28-17
and

Office Use Only



100300662101

06/23/17--01022--002 **35.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

17 JUN 23 AM 8:49

FILED

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: INDDIT CORPORATION

DOCUMENT NUMBER: P06000107321

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert Salinas
Name of Contact Person
Reality Check. Business Solutions
Firm/ Company
1001 Ives Dairy Rd. Suite 206.
Address
Miami, FL, 33179.
City/ State and Zip Code
rsalinas@rcbs.biz
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert Salinas at (786) 338 9000 Ext 101.
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee & Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
|---|--|---|--|

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

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment
to
Articles of Incorporation
of

FILED

17 JUN 23 AM 8:49

INDDIT CORPORATION

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

DEPT. OF STATE
TALLAHASSEE, FLORIDA

P06000107321

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent _____

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

(Attach additional sheets, if necessary)

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.

| | | |
|-----------------|-----------|----------|
| <u>X</u> Change | <u>PT</u> | John Doe |
|-----------------|-----------|----------|

| | | |
|-----------------|----------|-------------------|
| <u>X Remove</u> | <u>V</u> | <u>Mike Jones</u> |
|-----------------|----------|-------------------|

| | | |
|-------|----|-------------|
| X Add | SV | Sally Smith |
|-------|----|-------------|

Title

Name

Address

- 1) ☐ Change DIRECTOR. CIPOLLITI VENANZIO 19495 BISCAYNE BLVD.
☐ Add SUITE 800.
☒ Remove AVENTURA, FL 33180

- 2) ☐ Change DP VAZQUEZ-PENA, ANA. ONE SE 3rd AVE
☒ Add 15TH FLOOR
☐ Remove Miami FL 33131.

- 3) ☐ Change DVST IZAQUIRRE, MARIA. ONE SE 3RD AVE
☒ Add 15 TH FLOOR.
☐ Remove MIAMI FL 33131.

- 4) _____ Change _____
 _____ Add _____
 Remove _____

- 5) _____ Change _____
_____ Add _____
Remove

- 6) _____ Change _____
 _____ Add _____
 Remove _____

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

[illegible]

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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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 cast 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 6/20/2017.

Signature _____

(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)

Robert Salinas
(Typed or printed name of person signing)

Senior Accountant.
(Title of person signing)