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SECRETARY OF STATE TALLAHASSEE, FI OR TALLAHASSEE,

MAY 0 2 2017. T. LEMIEUX



COVER LETTER

TO: Amendment Section Division of Corporations DT Legal Recruiting, Inc. NAME OF CORPORATION: DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Meg Zampino Name of Contact Person DT Legal Consulting Firm/ Company 3111 Bel Air Drive, Suite 15C Address Las Vegas, NV 89109 City/ State and Zip Code meg.bertinil@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Meg Zampino Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee \$43.75 Filing Fee & Certificate of Status □\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address Street Address**

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

DT Legal Recruiting, Inc.		
(Name of Corpo	ration as currently filed with the Florida Dep	t. of State)
(De	ocument Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Floits Articles of Incorporation:	orida Statutes, this Florida Profit Corporation a	dopts the following amendment(s) to
A. If amending name, enter the new name of the DT Legal Consulting, Inc.	ne corporation:	TI
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "C word "chartered," "professional association," or	Corp," "Inc," or "Co". A professional corpor	The new orated" or the abbreviation attion name must contain the
B. Enter new principal office address, if application (Principal office address MUST BE A STREET A	able: ADDRESS)	
C. Enter new mailing address, if applicable:		
(Mailing address <u>MAY BE A POST OFFICE</u>	<u>BOX</u>)	
D. If amending the registered agent and/or reginew registered agent and/or the new register Name of New Registered Agent	istered office address in Florida, enter the nar red office address:	
	(Florida street address)	
New Registered Office Address:	(City)	, Florida(Zip Code)
New Registered Agent's Signature, if changing I I hereby accept the appointment as registered agen	Registered Agent: on. I am familiar with and accept the obligation Signature of New Registered Agent, if changing	SECRETARY OF TALLAHASSEE, FI
	Page 1 of 4	D I: C

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:

 $P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO \approx Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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>	John Doe				
X Remove	<u>v</u>	Mike Jones				
<u>X</u> Add	<u>sv</u>	Sally Smith				
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s			
1) Change	V	Jeffrey Zampino	3111 Bel Air Drive, Suite 15C			
X Add			Las Vegas, NV 89109			
Remove						
2) Change			_			
Add						
Remove						
3) Change						
Add						
Remove						
4) Change						
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

raiden adan	or adding additional a tional sheets, if necessar	y). (Be specific)				
			-			
					 	
					<u></u>	

f an ameno	lment provides for an o	exchange, reclassi	fication, or cancel	lation of issued sh	ares,	
provisions	for implementing the a	amendment if not	contained in the a	mendment itself:		
(ij noi	applicable, indicate N/A	<i>i</i>)				
		···				
				•		
				·		
						_

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 thi document's effective date on the	s block does not meet the applicable statutory filing requirements, this date v Department of State's records.	vill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	51	
•	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
24 April	12017	
DatedSignature	Mange Zanois	_
sele	a director, president or other officer – if directors or officers have not been eted, by an incorporator – if in the hands of a receiver, trustee, or other court ointed fiduciary by that fiduciary)	
	Margaret E. Zampino	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

. . . .