P070000 59375

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone #)
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☐ PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name)
V		,
(D-		
(DC	cument Number)	
Certified Copies	Certificates of	f Status
Special Instructions to	Eiling Officer:	
Special instructions to	riing Oncer.	
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2015 HAY I I PM 2: 06 SECRETARY OF STATE SAI LAHASSEE FLORIDA

MAY 18 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	ION:	OON SIGNS, INC				
DOCUMENT NUMBER	P07000059375					
The enclosed Articles of A	mendment and fee are s	submitted for filing.				
Please return all correspon	dence concerning this m	natter to the following:				
		JULIO MEDINA				
		Name of Contact Person				
		DON SIGNS, INC.				
		Firm/ Company				
	5250 BTC PLACE					
	Address					
	KISSIMMEE, FL. 34758					
		City/ State and Zip Code				
		INFO@DONSIGNS.COM				
	E-mail address: (to be	used for future annual report notification)				
For further information con	- ,					
JULIO MEDINA		at () 344-9444 Area Code & Daytime Telephone Number				
Name of Co	ontact Person	Area Code & Daytime Telephone Number				
Enclosed is a check for the	following amount made	e 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 (Additional copy is enclosed) □\$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

DON SIGNS, INC.		
(Name of Corporation as current	ly filed with the Florida Dept, of State)	프쮸
P070000	59375	HAS
(Document Number of	of Corporation (if known)	"
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the follow	wing amendment
A. If amending name, enter the new name of the corporation: N/A		P. C.
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name mu	The new abbreviation ust contain the
D. Fratan man universal effice adduser if analysis like	N/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 registered agent and/or the new registered office address 		
Name of New Registered Agent N/A		
	reet address)	
New Registered Office Address: N/A	. Florida	•
The state of the s		Zip Code)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar)n.
Signature of New	negisterea Agent, ij changing	

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.

Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Т	AMY MEDINA	5250 BTC PLACE
X Add			KISSIMMEE, FL 34758
Remove			
2) Change			
Add			
Remove			
3) Change	-		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6 Charres			
6) Change			
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)	_			
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F. If an amendment provides for an exc	nange, reclassificati	on, or cancellat	ion of issued sl	<u>iares,</u>	
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not conta	<u>ined in the ame</u>	endment itself:		
N/A					
				 _	 ,
·					
		•			_
		-			

The date of each amendment date this document was signed		, if other than the
_	N/A	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date whe Department of State's records.	ill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/we by the shareholders was/w	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 ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s east for the amendment(s) was/were sufficient for approval	
by	(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.	re adopted by the incorporators without shareholder action and shareholder	
M. Dated	AY 04, 2015	
Signature		
Se	By a director, president or other officer in directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court popointed fiduciary by that fiduciary)	
	JULIO MEDINA	
	(Typed or printed name of person signing)	
	PDT	
	(Title of person signing)	