

PO7000091710

(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:

Office Use Only



600182944336

07/09/10--01016--019 **43.75

FILED

2010 AUG 31 AM 10:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Amend

TB

SEP - 2 2010

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: DMS Systems, Inc.

DOCUMENT NUMBER: P07000091710

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

Please return all correspondence concerning this matter to the following:

Adam Savitch

Name of Contact Person

DMS Systems, Inc.

Firm/ Company

3801 South Ocean Drive

Address

Hollywood FL 33019

City/ State and Zip Code

adam.savitch@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Adam Savitch at (954) 439-2200

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:

☐ \$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 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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 3, 2010

DAVID SAVITCH
1400 NW 9TH AVE APT 10
BOCA RATON, FL 33486

2ND ML

SUBJECT: DMS SYSTEMS, INC.
Ref. Number: P07000091710

We have received your document for DMS SYSTEMS, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document you submitted has been prepared pursuant to nonprofit statutes (chapter 617, Florida Statutes). As the entity was originally filed as a corporation for profit, this document should be filed pursuant to chapter 607, Florida Statutes.

We are enclosing the proper form(s) with instructions for your convenience.

The name of the entity must be identical throughout the document.

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) 245-6925.

Teresa Brown
Regulatory Specialist II

Letter Number: 710A00016863



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 12, 2010

ADAM SAVITCH
DMS SYSTEMS, INC.
3801 OCEAN DR STE 15K
HOLLYWOOD, FL 33019

SUBJECT: DMS SYSTEMS, INC.
Ref. Number: P07000091710

We have received your document for DMS SYSTEMS, INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

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Teresa Brown
Regulatory Specialist II

Letter Number: 710A00016863

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

(Document Number of Corporation (if known))

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

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:

New Registered Office Address:

(Florida street 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

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)

Title	Name	Address	Type of Action
President	David Savitch	1400 NW 9th Ave; APT 10 Boca Raton FL 33486	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
President	Adam Savitch	3801 S. Ocean Dr. Hollywood FL 33019 Suite 15K	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

MR. DAVID SAVITCH IS TO BE REMOVED FROM ALL COMPANY PAPERWORK AND AS SUCH MR. ADAM SAVITCH SHALL NOW BE IN HIS STEAD. EFFECTIVE MARCH 28, 2010 MR. DAVID SAVITCH & REPRESENTATIVE INDIVIDUALS DECIDED MR. SAVITCH (DAVID) SHALL HOLD NO PAST, PRESENT &/OR FUTURE LIABILITY ON BEHALF OF THE COMPANY & HIS INVOLVEMENT CEASES EFFECTIVE MARCH 28, 2010

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)

The date of each amendment(s) adoption: March 28, 2010
(date of adoption is required)
Effective date if applicable: May 1, 2010
(no more than 90 days after amendment file date)

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 May 15, 2010
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)

Adam Savitch
(Typed or printed name of person signing)

President
(Title of person signing)