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TALLAHASSEE, FLORID

APPROVER



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF COR	PORATION:	DDMJJ, INC	
DOCUMENT NUMBER:		P07000099725	
The enclosed Artic	cles of Amendment and fee a	are submitted for filing.	
Please return all co	orrespondence concerning th	is matter to the following:	
		RITT BAIRD-GRAZ	
	1	Name of Contact Person	
		DDMJJ, INC	
		Firm/ Company	
	2017 S	W MONTERREY LANE	
		Address	
	PORT SAI	NT LUCIE, FLORDA 34953	
		City/ State and Zip Code	
	BRITT.Gi E-mail address: (to be use	RAZ@GMAIL.COM ed for future annual report notification)	
For further inform	ation concerning this matter,	please call:	•
	BRITT GRAZ	at (305) 7	63-7968
Name	of Contact Person	Area Code & Daytime Tel	ephone Number
Enclosed is a chec	k for the following amount n	nade payable to the Florida Depar	tment of State:
₹ 35 Fiting 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 Circl	e

Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation**

DDMJJ, INC

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

P07000099725

(Document Num	nber of Corporation (if know	vn)
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	6, Florida Statutes, this Flo	orida Profit Corporation adopts the follo
A. If amending name, enter the new name of	the corporation:	
		The new
name must be distinguishable and contain t abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "proj	designation "Corp," "Inc,	" or "Co". A professional corporation
B. Enter new principal office address, if appl	licable:	
(Principal office address <u>MUST BE A STREE</u>		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC		
D. If amending the registered agent and/or re	egistered office address in	Florida, enter the name of the
new registered agent and/or the new regis		
Name of New Registered Agent:		
New Registered Office Address:	(Florida street ad	(dress)
_		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changin	ng Registered Agent:	
l hereby accept the appointment as registered ag		nd accept the obligations of the position.
· · · · · · · · · · · · · · · · · · ·	ionature 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)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
<u>VP</u>	DANIELLE GRAZ	2017 SW MONTERREY LANE PORT SAINT LUCIE, FL 34953	
			☐ Add ☐ Remove
			☐ Add ☐ Remove
(and the	dditional sheets, if necessary). (Be	specific)	
provisio		e, reclassification, or cancellation of issect if not contained in the amendment in	

The date of each amendment	(s) adoption: 2/25/ 201/
Effective date <u>if applicable</u> :	(date of adoption is required)
Zitetive date <u>ir applicable</u> .	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
	re approved by the shareholders through voting groups. The following statemen d for each voting group entitled to vote separately on the amendment(s):
"The number of votes of	east for the amendment(s) was/were sufficient for approval
by	,,,
•	(voting group)
The amendment(s) was/wer action was not required.	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated_FEBI	RUARY 25, 2011
Signature	Britt-Barid-Graz
	a director, president or other officer – if directors or officers have not been
	cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
	BRITT BAIRD-GRAZ
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)