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SCHARLSSEE, FLORIDA

MAY 2 2 2013 T. LEYMEUK



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: DAVYNSSE HOM	JES, INC	
DOCUMENT NUMB	P07000100502		
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	JOSE A ALONSO		
-	DAVYNSSE HOMES, INC	Name of Contact Person	1
-		Firm/ Company	
	430 WEBER BLVD S		
-	NAPLES, FL 3417	Address	
-		City/ State and Zip Cod	ρ
davyn	ssehomes@yahoo.com E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call;	
JOSE A ALONSO		at (<u>239</u>	280-6700
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
S35 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		Ameno Divisio Clifton 2661 F	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment

A	rticles of Amenamen to	Į.	
Art	icles of Incorporatio	n	page 1 1 page
	of	1	FILED
Darki	ness!	Imps T	nc
(Name of Corporation	as currently fik	h the Florida Dept. of	State) WILL HAY 21 D B
P07000100502			ecoses es és
(Document)	Number of Corporati	ion (if known)	INLLABASS TO STA
	•		-2,018355, FE08
Pursuant to the provisions of section 607,1006, Florida St its Articles of Incorporation:	atutes, this <i>Florida Pi</i>	<i>ofit Corporation</i> adopts	othe following amendment(s) to
A. If amending name, enter the new name of the corpo	oration:		
			The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the abl	"Inc," or "Co". A p		
B. Enter new principal office address, if applicable:			
(Principal office address MUST BE A STREET ADDRE	<u></u>		
			·
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 Flo	rida, enter the name of	f the
new registered agent and/or the new registered off		Transcript the name of	- (ii)
Name of New Registered Agent			
Stane of New Kegisterea Agera			
	- C		
	tFlorida street address	ı	
New Registered Office Address:		, Flc	orida
	(City)		(Zip Code)
New Registered Agent's Signature, if changing Registe	arnd Agant:		
Thereby accept the appointment as registered agent. La.		ecept the obligations of	the position.
·		-	
	.		
Signatu	re 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)

Please note the officer director title by the first letter of the office title:

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

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: <u>X</u> 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	VP	ERNESTO M CASTILLO	3335 31ST AVE NE
X Add			NAPLES, FL 34120
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			_
Add			
Remove			
5) Change			_
Add			<u></u>
Remove			
6) Change			•
Add	-		
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
NONE	
_ _	
	
	
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;	<u>i</u>
(if not applicable, indicate N/A)	
NONE	
	a
	
	

05/14/2018	
The date of each amendment(s) adoption:	, if other than the
05/14/2018	
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 wildocument's effective date on the Department of State's records.	If not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east 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.	
05/14/2018 Dated	
Signature (By a director president or other officer – if directors or officers have not been succeed, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
JOSE A ALONSO	
(Typed or printed name of person signing)	
PRESIDENT	

(Title of person signing)