P08000009943

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COVER LETTER

TO: Amendment Section

Division of Corporations

Drako Direct Inc. NAME OF CORPORATION: _ P08000009943 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Jose A Fernandez Name of Contact Person Drako Direct Inc. Firm/ Company 2651 SW 152 CT Address Miami, FL 33185 City/ State and Zip Code jfdez64@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jose A Fernandez Enclosed is a check for the following amount made payable to the Florida Department of State: ■ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section **Division of Corporations Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

Drako Direct Inc

nendment(s) to

(Name of Corneration or summer					
		Torkia Deot. of State	;)		
	0000994 or of Corporation (.	
·	• ,				
Pursuant to the provisions of section 607,1006, Fi is Articles of Incorporation:	lorida Statutes, this	Florida Profit Corpo	<i>ration</i> adopt	is the following amends	
A. If amending name, enter the new name of the	he corporation:				
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "tword "chartered," "professional association," or	Corp," "Inc," or	"Co". A professiona "P.A."	l corporation	n name musi contain i	
3. Enter new principal office address, if applic		Southeast	Financia	Center	
Principal office address <u>MUST BE A STREET</u>	ADDRESS)	200 S. Biscay	200 S. Biscayne Blvd. Suite 2790		
		Miami, F	L 331	31	
Enter new mailing address, if amplicable:	E BAY:				
(Mailing oddress MAY BE A POST OPPICE	L BYA			 	
					
				·	
D. If amending the resistered agent and/or re-	nistavad n ili ca add	bassin Flavida anta	r the name o	of the	
			THE NUMBER		
new registered agent and/or the new regist	ered office addres	<u>\$:</u>			
Name of New Registered Agent	ered office addres Pastroff, Bai	s: rja, Kelly & Co	•		
Name of New Registered Agent	ered office addres Pastroff, Bai 100 SW 50 T	धः rja, Kelly & Co errace Suite ३	•		
Name of New Registered Agent	ered office addres Pastroff, Bai 100 SW 50 T (Florida si	s: rja, Kelly & Co ernace Suite 3 rees address)			
Name of New Registered Agent	ered office addres Pastroff, Bai 400 SW 50 T (Florida st Miar	s: rja, Kelly & Co eπace Suite 3 rves address) ni	•	3155	
Name of New Registered Agent 74	ered office addres Pastroff, Bai 100 SW 50 T (Florida si	s: rja, Kelly & Co eπace Suite 3 rves address) ni			
Name of New Registered Agent 74 New Registered Office Address: New Registered Agent's Signature, if changing thereby accept the appointment as registered agent's Signature.	Pastroff, Bai Pastroff, Bai 400 SW 50 T (Florida st Miar (City Registered Agen and I am familiar	s: rja, Kelly & Co rect address) ni)		(3155 (Zip Code)	

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 Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change		_		
Add				
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add		_		
Remove				

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an amendmen	it provides for an exc	hange, reclassifi	cation, or cance	llation of issued sh	ares,
	icable, indicate N/A)	enament if not c	ontained in the i	imenament itseit:	
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date this document was signed		_, it other than the
Effective date if applicable:	5/15/2014	
	(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) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement and 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/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated5/	15.2014	
	by a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court	-
	opointed fiduciary by that fiduciary)	
	Jose A Fernandez	_
	(Typed or printed name of person signing)	
	President/CEO	_
	(Title of person signing)	