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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:DA. LUGO DRIVIN	G INC
DOCUMENT NUMBER: P08000010525	
The enclosed Articles of Amendment and fee are submi	tted for filing.
Please return all correspondence concerning this matter	to the following:
NA 3529 CARDIN	Firm/ Company FIRM/ Company Address Address STENTHER DRIVE Address City/ State and Zip Code Or future annual report notification)
For further information concerning this matter, please ca	uli:
DAVID LUGO	at (<u>813</u>) <u>447-0005</u> Area Code & Daytime Telephone Number
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made paya	able to the Florida Department of State:
Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

of

(Name o	f Corporation as current	ly filed with the Florida Dept. of	State)				
708 l	0000 1252	5					
	(Document Number of	f Corporation (if known)					
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006. Florida Statutes, this	Florida Profit Corporation adopt	is the follow	cing am	endment(s) to		
A. If amending name, enter the new na	me of the corporation:			The	new		
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	orp," "Inc," or "Co"	A professional corporation name	the abbrevic must con	ution "C tain the	orp.," word		
B. Enter new principal office address, i	f applicable:	9301 CRANDON LANE	9301 CRANDON LANE				
(Principal office address <u>MUST BE A STREET ADDRESS</u>)		TAMPA F1, 33635	TAMPA F1. 33635				
				-23			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		9301 CRANDON LANE	-;.i	3 JUR			
		TAMPA, FL, 33635		122			
			333	2	Ш		
D. If amending the registered agent an new registered agent and/or the new			of the STATE	9: 10	- -		
Name of New Registered Agent	DAMARIS ARIAS						
	9301. CRANDON LAN	E					
	(Florida street address)						
New Registered Office Address:	TAMPA 330						
		(City)	(2)	ip Code)			
New Registered Agent's Signature, if ch I hereby accept the appointment as registe	nanging Registered Agent wed agent. I am familiar	<u>:</u> with and accept the obligations of	the position	17.			
		egistered Agent, if changing					
<i>></i>	Signature of New R	egistered Agent, if changing					

Check if applicable

■ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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.

X Change	<u>PT</u>	John Doc		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action	<u>Title</u>	Name		Address
(Check One) 1) X Change	P	DAMARIS	ARIAS	9301 CRANDON LANE
Add				TAMPA FL 33635
Remove				
2) Change		_		
Add				
Remove 3) Change				
Add				
Remove				<u> </u>
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_ 		
Add				
Remove				

If amending or adding as (Attach additional sheets, a	if necessary).	(Be specific)	yay mere.			
(y c	(2)				
					-	
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						<u> </u>
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<u> </u>						
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•						
If an amendment provid-	es for an exch:	ange, reclassifica	tion, or cancella	tion of issued s	hares,	
provisions for implemen	nting the amen	dment if not con	tained in the an	<u>iendment itself</u>	<u> </u>	
(if not applicable, in	dicate N/A)					
					····	
				· · · · ·	······································	
						

The date of each amendment(s) adoption	:			, if other than the
date this document was signed.				
Effective date if applicable:				
	(no more than	90 days after amen	dment file date)	
Note: If the date inserted in this block do document's effective date on the Departmen			ing requirements, th	is date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)			
☑ The amendment(s) was/were adopted by action was not required.	the incorporators, e	or board of directors	without shareholder	action and shareholder
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient		he number of votes	east for the amendn	ient(s)
☐ The amendment(s) was/were approved be must be separately provided for each vo				
"The number of votes east for the	amendment(s) was/v	vere sufficient for a	pproval	
bv	(voting group)		••• ••	
	(voting group)			
Dated 3-21- 6	23			ij.
Signature () C ~	m ()in			
(By a director,			or officers have not b	
	incorporator – if in ciary by that fiducia		ver, trustee, or other	court
	•	^ .		
<u> </u>	MARIS	d name of person si	S	
\	_		giing)	
Vic	CE TREG	SIDENT		
	(Title of person	signing)		