P09000020339

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	:y/State/Zip/Phone	= #)
PICK-UP	WAIT	MAIL.
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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08/31/11--01017--005 **43.75





COVER LETTER

TO: Amendment Section Division of Corporations	
NAME OF CORPORATION: DSTD INC	
DOCUMENT NUMBER: P0900020339	
The enclosed Articles of Amendment and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Johanna Jimenez Name of Contact Person	
DSTO INC. Firm/ Company	
4130 W. Waters Avenue	
Tampa FL 33614. City/ State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Thanks Timenez at (813) 466-4543. 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 & □ \$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy	

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

(Additional Copy is enclosed)

Articles of Amendment to Articles of Incorporation of

DSTD INC

(Name of Corporation as cu	rrently filed with the	Florida Dept. of State)		
PC	9000020339			
	umber of Corporation	(if known)		
Pursuant to the provisions of section 607.10 amendment(s) to its Articles of Incorporation		this Florida Profit Corpor	ration adopts the follow	ing
A. If amending name, enter the new name	of the corporation:			
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or t name must contain the word "chartered," "p	he designation "Corp.	o," "Inc," or "Co". A proj	fessional corporation	
B. Enter new principal office address, if a			* * *	
(Principal office address <u>MUST BE A STRI</u>	<u>EET ADDRESS</u>)			
C. Enter new mailing address, if applicabe (Mailing address MAY BE A POST OF) D. If amending the registered agent and/o	<u></u>	dress in Florida, enter the	AUG 31 PH 1: 5	
new registered agent and/or the new re			name of the	
Name of New Registered Agent:	JOHANNA JIME	ENEZ		
New Registered Office Address:	4130 W. WATE	RS AVENUE street address)		
	TAMPA (City)	, Flor (Zip Code	rida_33614	
New Registered Agent's Signature, if chan I hereby accept the appointment as registered.	d agent. I am familiar		tions of the position. —	

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>	ANGEL SANCHEZ	538 EAST LAKE DR. OLDSMAR, FL 34677	_ □ Add □ ☑ Remove
<u> </u>	JORGE JIMENEZ	4439 HIDDEN SHADOW DR. TAMPA, FL 33614	☐ Add ☐ Remove
CEO_	EDGAR GARBIZO	5304 MACBETH CT. TAMPA, FL 33624	_ □ Add _ ☑ Remove
	ding or adding additional Articles, ent dditional sheets, if necessary). (Be spe		
PLEASE	CHANGE JOHANNA JIMENEZ F	ROM VICE PRESIDENT TO P	RESIDENT
AND REM	MOVE EVERY BODY ELSE FROM	M CORPORATION.	
provisi	mendment provides for an exchange, rons for implementing the amendment not applicable, indicate N/A)		
			· · · · · · · · · · · · · · · · · · ·

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>	Name	<u>Address</u>	Type of Action
<u> </u>	JOHANNA JIMENEZ	4439 HIDDEN SHADOW DR. TAMPA, FL 33614	☐ Add ☐ Remove
			Add Remove
			Add Remove
(attach ad	ling or adding additional Articles, eductional sheets, if necessary). (Be s		RESIDENT
AND REM	10VE EVERY BODY ELSE FRO	OM CORPORATION.	
provisio		, reclassification, or cancellation of iss It if not contained in the amendment i	

The date of each amendment	
Fffective data if applicables	(date of adoption is required)
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
The amendment(s) was/we 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 statemend 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/we action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated_08/1 Signature	6/2011
(By	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 ointed fiduciary by that fiduciary)
арр	sinted indically by that indicially)
	JOHANNA JIMENEZ
	(Typed or printed name of person signing)
	VICE PRESIDENT
	(Title of person signing)