P0900057934

(Re	equestor's Name)			
(Ad	ldress)			
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(City/State/Zip/Phone #)				
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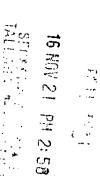
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R. WEGLI



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: KDM-	CORPORATION				
DOCUMENT NUMBER: P09000079834					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
RETO MUELLER					
	Name of Contact Person				
KDM-7 CORPORATION					
	Firm/ Company				
6112 BENJAMIN	ROAD				
	Address				
TAMPA, FL 336	TAMPA, FL 33634				
	City/ State and Zip Code				
RENE@GARDENLIG	HTLED.COM				
-	ess: (to be used for future annual report notification)				
For further information concerning this matter, please call: RENE MORRIS 813 901-55-15					
Name of Contact Person	at (813) 901-5595				
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 Fil Certificate					
Mailing Address Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Clifton Building				

oth to the

Articles of Amendment to Articles of Incorporation of

16 NOV 21 PM 2:58

KDM-7 CORPORATION

KDM-7 CORPORATION		
(Name of Corporation as curren	ntly filed with the Florida Dept. of State)	
P09000079834		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new name of the corporation:		
	Th	
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the	
D. Francisco de desta de 60 en 1 de 100 en 16 en 18	6112 BENJAMIN ROAD	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	TAMPA, FL 33634	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6112 BENJAMIN ROAD	
(Muning autress MAT BE A TOST OTTTEE BOA)	TAMPA, FL 33634	
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address	dress in Florida, enter the name of the	
Name of New Registered Agent		
(Florida	ştreet address)	
,	· ·	
New Registered Office Address:	(City) , Florida (Zip Code)	
	(4)	
New Registered Agent's Signature, if changing Registered Agen	<u>nt:</u>	
I hereby accept the appointment as registered agent. I am familia	r with and accept the obligations of the position.	
Signature of New	v 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 = 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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	P/S	MICHELLE CHARLES	6112 BENJAMIM ROAD
X Add			TAMPA, FL 33634
Remove			
2) X Change	VP/T	RETO MUELLER	6112 BENJAMIN ROAD
Add			TAMPA, FL 33634
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		-	
Add			
Remove			

	(Attach additional sheets, if necessary). (Be specific) AMENDING OFFICERS TO ADD MICHELLE A. CHARLES TO P/S AND CHANGING RETO MUELLER TO VP/I		
MENDING PRINCIPAL ADDRE	SS AND MAILING ADDRESS TO 6112 BENJAMIN ROAD, TAMPA, FL 33634		
	<u></u>		

If an amendment provides for a	an exchange, reclassification, or cancellation of issued shares,		
provisions for implementing the	he amendment if not contained in the amendment itself:		
(if not applicable, indicate	N/A)		
/A			

The date of each amendmen	NOVEMBER 1, 2016 I(s) adoption:	, if other than the
date this document was signed		
Effective date <u>if applicable</u> :	NOVEMBER 1, 2016	
meenve date <u>ii appricable</u> .	(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on t	this block does not meet the applicable statutory filing requirements, this he Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
	re adopted by the shareholders. The number of votes cast for the amendmen ere sufficient for approval.	t(s)
	re approved by the shareholders through voting groups. The following states ed for each voting group entitled to vote separately on the amendment(s):	ment
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
,	(voting group)	
action was not required.	re adopted by the board of directors without shareholder action and shareholder action and shareholder action and shareholder	lder
action was not required.	re adopted by the meorporators without shareholder action and shareholder	
11/9/ Dated	2016	
Signature ∠	Ret much	
(I s	By a director, president or other officer – if directors or officers have not bee elected, by an incorporator – if in the hands of a receiver, trustee, or other coppointed fiduciary by that fiduciary)	
	RETO MUELLER	
	(Typed or printed name of person signing)	
	VP/T	
	(Title of person signing)	