P1000034349

(Re	equestor's Name)	· - -
(Ad	dress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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(Bı	isiness Entity Nan	ne)
(Do	ocument Number)	
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PMO) R. WHITE NOV - 3 2007

COVER LETTER

TO: Amendment Section Division of Corporations The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: For further information concerning this matter, please call: 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 & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy

. Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Ft. 32314

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

is enclosed)

FILED

Articles of Amendment

	to Articles of Incorpora	tion 17 NOV	/-1 PM 1:46
Home Divine Design	DRapepy Ce	nter SEPTE	IARY OF STATES YSSEE FLORIDA
	poration as currently filed v	with the Florida De	pt. of State)
Ψ	10000034349		
	Document Number of Corpor	ation (if known)	
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this Florida	Profit Corporation	adopts the following amendment(s)
A. If amending name, enter the new name of	the corporation:		
	·	···	The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp," "Inc," or "Co". A	mpany," or "incor professional corpo	porated" or the abbreviation pration name must contain the
B. Enter new principal office address, if app			
(Principal office address <u>MUST BE A STREE</u>	<u>T ADDRESS</u>)		
	-		
		<u> ==</u>	
C. Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFI</u>	<u></u>		
 If amending the registered agent and/or r new registered agent and/or the new registered. 		lorida, enter the na	ame of the
new registered agent and/or the new regis	stered office address:		
Name of New Registered Agent		•	
	(Florida street addre	(55)	
New Registered Office Address:			, Florida
	(City)		(Zip Code)
Nam Danistanad Amerika Siamakana ifiakanat	Danishand AA		
New Registered Agent's Signature, if changir I hereby accept the appointment as registered a	<u>ig Registered Agent:</u> gent. I am familiar with and	accept the obligation	ons of the position.
•			
	Signature of New Registere	d Anoma if the section	
	— SIRRUUTE OF NEW KERISIETE	и мусті, н спапуіну	<i>!</i>

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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One) 1) Change	Title V	Federico Reyes Blum	Address 1930 71st St., Apt 16 Miami, FL 33141
2) Change Add			
Remove 3) Change Add		·	
Remove 4) Change			
Add			
5) Change Add			
Remove			
6) Change Add Remove		-	

Attach additiona	adding additional Ar I sheets, if necessary)	. (Be specific)	The state of the s		
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If an amendmen provisions for i	t provides for an exc mplementing the am	hange, reclassifi	ication, or cancel contained in the a	ation of issued sh mendment itself:	ares,
(if not appli	cable, indicate N/A)				
				- 	
			<u> </u>		
	 -				

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 amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast 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 statemen must be separately provided for each voting group entitled to vote separately on the amendment(s):	rt.
"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.	
. Dated October 20, 2017	
Signature A A A A A A A A A A A A A A A A A A A	
selected, by an incorporator - if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
(Typed of printed name of person signing)	
- TKesident	
(Title of person signing)	

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