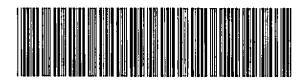
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(Re	questor's Name)	<u> </u>
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

TO: Amendment Section Division of Corpora		•	ı
NAME OF CORPORA		Son Advis	sony SERVICES, IN
DOCUMENT NUMBE	R:	000 346	3) '
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
	Davidson 100 E E-mail address: (to be us	Name of Contact Person Name of Contact Person VISO Firm/ Company Address City/ State and Zip Code Sed for future annual report	M Senvicos, Inc 11DCe + (3259)
For further information c	oncerning this matter, pleas	se call:	
Name of	Contact Person	at (GU H	de & Daytime Telephone Number
Enclosed is a check for the	ne following amount made	payable to the Florida Depa	ertment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amend Divisio	g Address ment Section n of Corporations ox 6327	Amend Divisio	Address ment Section n of Corporations entre of Tallahassee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

to Articles of Incorporation

DAVIDEM Adi	1150m Services Inc
(Name of Corporation	on as currently filed with the Florida Dept. of State)
<u> </u>	3 3 4 6 3 7
(Docum	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the co	rporation:
	The new
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbre	rporation," "company," or "incorporated" or the abbreviation "Corp.," or "Co". A professional corporation name must contain the word viation "P.A."
B. Enter new principal office address, if applicable (Principal office address <u>MUST BE A STREET ADD</u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	NIA
D. If amending the registered agent and/or register new registered agent and/or the new registered of	ed office address in Florida, enter the name of the office address:
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Regit hereby accept the appointment as registered agent. If	stered Agent: I am familiar with and accept the obligations of the position.
Signa	ture of New Registered Agent, if changing
Chack 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	PT John Doe	
X Remove	V Mike Jones	
X Add	SV Sally Smith	
Type of Action (Check One)	<u>Title</u> <u>Name</u>	Address
1) Change	V.P FREDRUCK P PARIA	n, 12
Add Remove 2) Change	V.P James S. DAVIDEN	100 E. Dun Mace St. Augustne, Fz 32092
Add Remove Change Add		St. Ayrohe Francisco
Remove 4) Change Add		
Remove 5) Change Add		
Remove 6) Change Add Remove		

	heets, if necessary).	(De specific)				
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an amendment	provides for an exc	nange, reclassifi	cation, or cancell	ation of issued	shares,	
(if not applica	plementing the amoble, indicate N/A)	<u>inament it not c</u>	ontained in the a	<u>menament itse</u>	<u>lf:</u>	
<u> </u>						
		· · · · · · · · · · · · · · · · · · ·		· -		
			11 /2			
	<u></u>	- V) '			
						_
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The date of each amendment(s) adoption:	, if other than the
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 we document's effective date on the Department of State's records.	rill not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action a action was not required.	nd shareholder
☐ 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 statement must be separately provided 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)	
Dated	
Signature (By a director, president or other officer if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Edward Ei	
(Typed or printed name of person signing)	
(Title of person signing)	 -