

P11 000035406

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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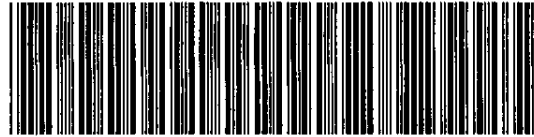
(Business Entity Name)

(Document Number) -

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TALLAHASSEE, FLORIDA

3/13/17

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: BUY DMI INC.

DOCUMENT NUMBER: P11000035406

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

MATHEW W. SABIA

Name of Contact Person

BUY DMI INC.

Firm/ Company

9942 S.R. 52

Address

HUDSON, FL 34669

City/ State and Zip Code

matt@buydmi.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Josh Stewart josh@buydmi.com

at (727) 809-0785

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 &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed)

☐ \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed)

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



Florida Department of State
Division of Corporations
Amendment Section
P.O. Box 6327
Tallahassee, FL 32314

Tuesday, March 7, 2017

RE: Articles of Amendment for Buy DMI, Inc.
Document Number: P11000035406

Dear Division of Corporations,

Please find our articles of amendment enclosed with this correspondence. In addition, please find a check in the amount of \$35.00 made payable to the Florida Department of State representing payment for the filing fee, also enclosed herein.

The amendments reflect our new office address, and the new addresses for our registered agent, Mathew Sabia, and our President, Ian Pitkoff.

If there are any questions, or any issues in processing this amended, please don't hesitate to contact me. I can be reached directly at 727-809-0785 or via email at josh@buydmi.com

Sincerely,

A handwritten signature in black ink, appearing to read "Josh Stewart", is written over a horizontal line.

BUY DMI INC.
Josh Stewart
9942 State Road 52
Hudson, FL 34669
p: 888-296-9928
f: 1-888-777-8695
e: josh@buydmi.com
www.BuyDMi.com

Articles of Amendment
to
Articles of Incorporation
of

BY DMI INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

P11000035406

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

BUY DMI INC.

9942 S.R. 52

HUDSON, FL 34669

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

BUY DMI INC.

9942 S.R. 52

HUDSON, FL 34669

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent MATHEW W. SABIA

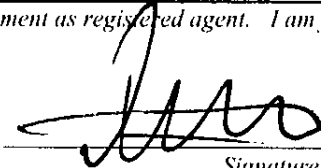
1770 HIDDEN SPRINGS DRIVE, TRINITY, FL 34655

(Florida street address)

New Registered Office Address: _____, Florida _____
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.



Signature of New 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 PT John Doe

X Remove V Mike Jones

X Add SV Sally Smith

<u>Type of Action</u> (Check One)	<u>Title</u>	<u>Name</u>	<u>Address</u>
1) <u>X</u> Change	<u>P</u>	<u>IAN PITKOFF</u>	<u>10931 OYSTER BAY CIRCLE</u>
<u> </u> Add			<u>NEW PORT RICHEY, FL 34654</u>
<u> </u> Remove			
2) <u> </u> Change	<u> </u>	<u> </u>	<u> </u>
<u> </u> Add			<u> </u>
<u> </u> Remove			<u> </u>
3) <u> </u> Change	<u> </u>	<u> </u>	<u> </u>
<u> </u> Add			<u> </u>
<u> </u> Remove			<u> </u>
4) <u> </u> Change	<u> </u>	<u> </u>	<u> </u>
<u> </u> Add			<u> </u>
<u> </u> Remove			<u> </u>
5) <u> </u> Change	<u> </u>	<u> </u>	<u> </u>
<u> </u> Add			<u> </u>
<u> </u> Remove			<u> </u>
6) <u> </u> Change	<u> </u>	<u> </u>	<u> </u>
<u> </u> Add			<u> </u>
<u> </u> Remove			<u> </u>

E. If amending or adding additional Articles, enter change(s) here:

(Attach *additional sheets, if necessary*). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:

(if not applicable, indicate N/A)

[illegible]

3/3/2017

The date of each amendment(s) adoption: _____, if other than the date this document was signed.

3/3/2017

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 will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- ☐ 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)

- ☐ 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 3/2/2017 _____

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)

MATT SABIA

(Typed or printed name of person signing)

CEO, CO-FOUNDER, AND REGISTERED AGENT

(Title of person signing)