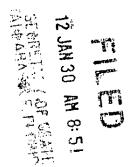
(Red	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nam	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

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TO: Amendment Section

Tallahassee, FL 32314

COVER LETTER

Division of Corporations		
NAME OF CORPORATION:	D Anto Nove	as Iove
DOCUMENT NUMBER: P/1000	0090876	
The enclosed Articles of Amendment and fee	are submitted for filing.	
Please return all correspondence concerning the	his matter to the following:	
	Name of Contact Person	
1106 GAR	216ALdi 57 E Address	
. Lehigh san	PES FL 339- City/ State and Zip Code) /
Rose 0268 (a) 1-16 B-mail address (to be use	of mail. Com ed for future armual report notification)	
For further information concerning this matter,	, please call:	
Name of Contact Person	at (399) 565 Area Code & Daytime Tele	2034 ephone Number
Englosed is a check for the following amount n	nade payable to the Florida Depart	ment of State:
\$35 Filing Fee & Certificate of Status	S43.75 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	Street Address Amendment Section Division of Corporations Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment
Articles of Incorporation
of Silver
70 1 1 1 2 2 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
(Name of Corporation as currently filed with the Florida Dept. of State)
(Anima of Corporation are entremy lines with the Profiles Dept. of State)
(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) Lehig 4 Danes, FL. 33971
Lehigh Danes, FL. 33971
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 1/06 GANI SACLI SE E. Le 115 h Acres EL.
Letish somes, FL.
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: Roberto efantiner
New Registered Office Address: (Florida street address)
New Registered Office Address: 106 64 n i 5 n C d i 5 f E
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

(Atta	oved and title, name, and address of each Office ich additional sheets, if necessary)	r and/or Director being added:	
Title		Address	Type of Action
	Howeverly Robinguez Roberto Hantinez		Add Remove
Ł	Kobento Kantinez	1106 JANiballist E Zettight Herry FIL, 33971	Add Remove
			Add Remove
	amending or adding additional Articles, enter catach additional sheets, if necessary). (Be specific		
	f an amendment provides for an exchange, reclar rovisions for implementing the amendment if no (if not applicable, indicate N/A)		

· If amending the Officers and/or Directors, enter the title and name of each officer/director being

The date of each amendment(s)	adoption: 1/25/17	
*	(date of adoption is required)	
Effective date if applicable:		
	o more than 90 days after amendment file date)	
•		
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.)
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cas	for the amendment(s) was/were sufficient for approval	
by	"	
(v	ting group)	
The amendment(s) was/were action was not required.	dopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
Dated	1/25/17	
Xignature		
(Ву а с	rector, president or other officer - if directors or officers have not been	
selecte	, by an incorporator – if in the hands of a receiver, trustee, or other court	
appoin	ed fiduciary by that fiduciary)	
_	(Loberto Hartinez	
	(Typed or printed name of person signing)	
	Prosident.	
-	(Title of person signing)	