

(Re	equestor's Name)	
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(Ad	Idress)	
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(Ad	idress)	
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(Cir	ty/State/Zip/Phone #	¥)
<b>\</b>	<b>-</b>	,
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name	<del></del>
(Dc	ocument Number)	
Certified Copies	Certificates of	of Status
Special Instructions to	Filing Officer:	
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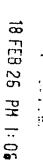
Office Use Only



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R. WHITE
FEB 2 8 2018



## **COVER LETTER**

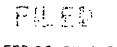
FO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: DASARO ENTER	PRISE INC	
DOCUMENT NUM	P12000006378		
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	Mario I. Molina, Esq.		
		Name of Contact Person	11
	MAS LAW FIRM		
	-	Firm/ Company	
	P.O.BOX 430810	, ,	
		Address	
	South Miami, FL 33243		
		City/ State and Zip Cod	<u> </u>
		377, 0.00 and 0.00	•
raiza	ntorresúadasaroenterprise.com		
	E-mail address: (to be u	sed for future annual report	notification)
For further information	on concerning this matter, plea	se call:	
NA		at (N/A	N A
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Div P.(	illing Address cendment Section vision of Corporations D. Box 6327 lahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building (xecutive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to

Articles of Incorporation



18 FEB 26 PM 1: 0% of

(Name o	f Corporation as curren	ntly filed with the Florida Dept. of State)
P12000006378		
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607, us Articles of Incorporation;	1006, Florida Statutes, thi	is Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new na	ıme of the corporation:	
N.A		The new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address,	if annlicable:	N/A
Principal office address MUST BE A S		N/A
		N/A
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX)</u>		N/A
		N/A
		N/A
D. If amending the registered agent an new registered agent and/or the new		
	N/A	
Name of New Registered Agent		
Name of New Registered Agent	N A	
Name of New Registered Agent		street address)
Name of New Registered Agent  New Registered Office Address:		street address) , Florida <sup>N/</sup> A

- 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 Evecutive 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 Doc	
X Remove	<u>v</u>	Mike Jones	
<u>X</u> Add	$\underline{\mathbf{S}}\underline{\mathbf{V}}$	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) Change	CEO	ROGER MENDOZA	16179 SW 154 CT
X Add			MIAMI, FL 33177
Remove			-14-14-1
2) Change	V	DANIEL OCHOA	16179 SW 154 CT
X Add			MIAMI, FL 33177
Remove			
3.) Change			
Add			
Remove			·
4) Change			
Add Remove			
5) Change			
Add		-	
Kemove			
5) Change		<u> </u>	
Add			
Remove			

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	
N/A	
<del> </del>	
MEN'S CONTRACTOR OF CONTRACTOR	
F. If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares.
provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
N/A	
· · · · · · · · · · · · · · · · · · ·	* · · · · · · · · · · · · · · · · · · ·
	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -

	N/A	
The date of each amendment		if other than th
late this document was signed		
	N/A	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
	his block does not meet the applicable statutory filing requirements, to Department of State's records.	this date will not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/wei by the shareholders was we	e adopted by the shareholders. The number of votes east for the amend are sufficient for approval.	lment(s)
	e approved by the shareholders through voting groups. The following : d for each voting group entitled to vote separately on the amendments:	
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
by N/A	<del>,</del>	
, -	(voting group)	
☐ The amendment(s) was/wei action was not required.	e adopted by the board of directors without shareholder action and shareholder.	reholder
The amendment(s) was/wer action was not required.	e adopted by the incorporators without shareholder action and shareholder	lder
Dated	02-15-2918	
Signature_	Maira Varies	
	ya director, president or other officer – if directors or officers have no	t been
	lected by an incorporator – if in the hands of a receiver, trustee, or oth	
	pointed fiduciary by that fiduciary)	
•		
	Kaiza Torres	
	(Typed or printed name of person signing)	
	President.	
	(Title of person signing)	