

(Re	questor's Name)			
(Ad	dress)			
(Ad-	dress)			
(Cit	y/State/Zip/Phone	<del>:</del> #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nan	ne)		
(Do	ocument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
:				

Office Use Only



700314939537

06/27/18--01019--020 \*\*35.00

R. WHITE JUN 2 9 2018

## **COVER LETTER**

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: DVM GUBAL SERVICES, NC. P12000008705 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: DOUCLAS SHACHNOW Name of Contact Person )VM GLOBALSERICES, INC. Firm/ Company 17047 A BOCA CLUB ZW.
Address BOCA RATON FLORIDA 33487
City/ State and Zip Code Shach now@worldbrowser.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: DOUGLAS SHACHAON at ( 561 ) 9888385 Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment Articles of Incorporation

FILED 18 JUH 27 AH \$: 50

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

12000008 705 (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

HANCES ONER HAN PONCH "corporation," "company," or " "Inc," or "Co". A professional bhreviation "P.A."  4400 No RESS)  Sure 210  Boca RATOL	"incorporated" or the abbreviati corporation name must contain t
"corporation," "company," or " "Inc," or "Co". A professional bbreviation "P.A."    4400 No   RESS	"incorporated" or the abbreviati corporation name must contain t
4400 No SURE 210 BOCA RATOL	FEDERAL HLY
BOCA RATOL	<b>~</b> .
•	FL 33431
ed office address in Florida, enter	the name of the
	the name of the
	the name of the
ffice address:	the name of the
-	<u> </u>

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	<u>v</u>	Mike Jones	NO CHANGES	
X Add	<u>sv</u>	Sally Smith	NO CHATOLO	
Type of Action (Check One)	Title	<u>Name</u>		<u>Addres</u> s
1) Change		-		
Add				
Remove				
2) Change		<u> </u>	<del> </del>	
Add				
Remove				<del></del>
3) Change		_	<del></del> -	
Add				
Remove				
4) Change				
Add				
Remove				
<i>5)</i> Change				
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
NO CHANGES FROM ORGINAL FLE
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)
N/A
,

The date of each amendment(s) adoption:late this document was signed.	, 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 document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendmen by the shareholders was/were sufficient for approval.	t(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following states must be separately provided for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
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.	der
Signature  (By a director, president or other officer – if directors or officers have not bee selected, by an incorporator – if in the hands of a receiver, trustee, or other coappointed fiduciary by that fiduciary)    OUFLAS SHACHNOW (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
PRES, ) ENT	
(Title of person signing)	