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SECRETARY OF STATE
TALL AHASSEE FLOSH

<u>.</u> ,.

COVER LETTER

TO: Amendment Section Division of Corporations	1			
NAME OF CORPORATION: DIESUEL LANGEOFING TIME. DOCUMENT NUMBER: P12000017170				
The enclosed Articles of Amendment and fee are sub	omitted for filing.			
Please return all correspondence concerning this matt	ter to the following:			
5/20/2	M. Lopez			
	Name of Contact Person			
	Firm/ Company			
702 YUCO	tan CT.			
Kissimmt	Address 34758			
	City/ State and Zip Code			
Sacant	10 agmail COM			
E-mail address: (to be use	ed for future annual report notification)			
For further information concerning this matter, please	e call:			
Gloria M. Lopez	at 321, 682-6155			
Name of Contact Person	Area Code & Daytime Telephone Number			
Enclosed is a check for the following amount made po	ayable to the Florida Department of State:			
☐ \$35 Filing Fee	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)			
Mailing Address	Street Address			
Amendment Section Division of Corporations	Amendment Section Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			

Tallahassee, FL 32301

•	to		FILE	11
	Articles of Incorporation		* / 1 1	لية م
MI TAMAR	okranina TNC			PH 12: 40
(Name of Corporation as currently	filed with the Florida Dept. of State	O ESERT	<u> 15 614 1</u> 1114 20 E E	¥ STATE, , FLORIDA:-
FIFICODORIG	0	· Ig/YCa C.	MIMODEL	, I CONIDA:
(Document Number of	of Corporation (if known)			
Pursuant to the provisions of section 607.1006, Flori its Articles of Incorporation:	ida Statutes, this Florida Profit Corpor	<i>ation</i> adopts	the followi	ng amendment(s) to
A. If amending name, enter the new name of the	corporation:			71
name must be distinguishable and contain the we "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or the	rp," "Inc," or "Co". A professional			
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AL		icato	<u>n C</u> 1.34	758 758
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	ox 702 Yur Xissimme	catar L-Z1	1 CT 1.347	<u>-</u>
D. If amending the registered agent and/or regist new registered agent and/or the new registered		the name of	the	
Name of New Registered Agent 102 New Registered Office Address:	City)	Florida <u>3</u>	1758 Zıp Code)	, Σ
New Registered Agent's Signature, if changing Relatives I hereby accept the appointment as registered agent.	egistered Agent: I apt familiar with and accept the obt	igations of t	he position.	

Articles of Amendment

changing

-Signature of New Registered

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	<u>PT</u> <u>Joh</u>	an Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add		ly Smith	
Type of Action	<u>Title</u>	<u>Name</u>	Address
(Check One) 1) Change	P	TESACA, KAfael	KILL WHITE HELDY BAY CI
Add)	oblando 71.
X Remove			52824
2) Change	$\overline{\mathcal{D}}$	Lopez, Gloria M.	702 Yucatar CT.
Add Remove			34758
3) Change			
Add			
Remove			
4) Change	Market - Miller - Div		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach add	ing or adding additional Articles, enter change(s) he dditional sheets, if necessary). (Be specific)	<u>re</u> :
	<u> </u>	
	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	
	.	
provision	ndment provides for an exchange, reclassification, on the for implementing the amendment if not contained	or cancellation of issued shares, I in the amendment itself:
(if no	ot applicable, indicate N/A)	
	111	
·	MIL	\
<u></u>	- 1 W 1 1 -	4

The date of each amendment(s) ad date this document was signed.	option:	, if other than the
J		
Effective date if applicable:	(no more than 90 days after amendment file date)	_
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement 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)	
	(voting group)	
The amendment(s) was/were adoption was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
Dated_S-2	7-13	
Signature	Glow M. Loger	_
selected	rector, president or other officer—If directors or officers have not been l, by an incorporator—it in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	Gloria M. Lopez	
	(Typed or printed name of person signing)	
-	(Title of person signing)	-