P12000027235

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COVER LETTER

TO: Amendment Section ,

Division of Corp	orations		•	
NAME OF CORPO	RATION: DDT LABS	INC		
	BER: P1200002723			
	of Amendment and fee are su			
Please return all corre	spondence concerning this ma	tter to the following:		
	CHRISTINA E PE	ETERSON		
	DDT LABS	Name of Contact Person	1	
		Firm/ Company		
3450 58TH AVENUE				
	VERO BEACH, F	Address L 32966		
		City/ State and Zip Cod	e	
DD	TLABS@GMAIL.	СОМ		
	E-mail address: (to be us	sed for future annual report	notification)	
For further informatio	n concerning this matter, pleas	se call:		
CHRISTINA	E PETERSON	at (772	, 678-0535	
Name of Contact Person			de & Daytime Telephone Number	
Enclosed is a check for	r 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)	□\$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		

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment.

to Articles of Incorporation of

FILED

DD1 FABS INC		2913 OCT 3 I A	M IU: 35
(Name of Corporation as currently f	filed with the Florida Dept. of St	ate)	ግ ምልምም P
P12000027235		SEURE JARY OF JALLAHASSEE.	FLORIDA
(Document Number of	f Corporation (if known)	73	
Pursuant to the provisions of section 607.1006, Florid ts Articles of Incorporation:	la Statutes, this Florida Profit Con	rporation adopts the following ame	endment(s)
A. If amending name, enter the new name of the c	orporation:		
N/A		The	new
name must be distinguishable and contain the won "Corp.," "Inc.," or Co.," or the designation "Corpword "chartered," "professional association," or the B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD	o," "Inc," or "Co". A profession abbreviation "P.A." e: N/A		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO</u>	N/A		
D. If amending the registered agent and/or registened new registered agent and/or the new registered	office address:		
Name of New Registered Agent CHRIS	STINA E PETERSON		
	8TH AVENUE		
	(Florida street address)		
New Registered Office Address: VERO	BEACH	, Florida 32966	
trew registered Office Address.	(City)	(Zip Code)	
New Registered Agent's Signature, if changing Reliated languages I hereby accept the appointment as registered agent.		e obligations of the position.	

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 <math>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 Doe	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	Р	KARSTEN BECK	3450 58TH AVENUE
Add			VERO BEACH, FL 32966
Remove			
2) Change	Р	CHRISTINA E PETERSON	3450 58TH AVENUE
Add			VERO BEACH, FL 32966
Remove			
3) Change	·		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
- [·]			
6) Change			
Add			
Remove			

N/A	ach additional sheets, if necessary). (Be specific)
W/A	and additional sheets, if necessary). (De specific)
	
. <u>If aı</u>	n amendment provides for an exchange, reclassification, or cancellation of issued shares,
. <u>If ai</u>	ovisions for implementing the amendment if not contained in the amendment itself:
pro	n amendment provides for an exchange, reclassification, or cancellation of issued shares, ovisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
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pro	ovisions for implementing the amendment if not contained in the amendment itself:
pro	ovisions for implementing the amendment if not contained in the amendment itself:

The date of each amendment(s) adoption: 10-28-13. date this document was signed.	, if other than the
Effective date if applicable: NOVEMBER 1, 2013	!
(no more than 90 days after amendment file date)	_
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 OCTOBER 28, 2013	
Signature Ollde	
(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)	
CHRISTINA E PETERSON	_
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	

Dago 4 of 4