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| (City/State/Zip/Phone #) | |
| PICK-UP WAIT | MAIL |
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| (Business Entity Name) | |
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| (Document Number) | |
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| Certified Copies Certificates of Status | |
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| Special Instructions to Filing Officer: | |
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | RATION: | CORP | | | | |
|--------------------------|--|--|--|--|--|--|
| DOCUMENT NUME | P13000015075 | | | | | |
| The enclosed Articles | The enclosed Articles of Amendment and fee are submitted for filing. | | | | | |
| Please return all corres | spondence concerning this ma | tter to the following: | | | | |
| | RAUL DE CARDENAS CA | NTILLO | | | | |
| | | Name of Contact Pers | on | | | |
| | DECAR GROUP CORP | | | | | |
| | | Firm/ Company | | | | |
| | 10870 NW 88 TER # 110 | | | | | |
| | | Address | | | | |
| | DORAL, FL 33178 | | | | | |
| | | City/ State and Zip Co | ode . | | | |
| RCA | RDEN65@HOTMAIL.COM | | | | | |
| | _ | sed for future annual repo | ort notification) | | | |
| | | | | | | |
| For further informatio | n concerning this matter, pleas | se call: | | | | |
| RAUL DE CARDENAS | | 786 | 3019163 | | | |
| Name | Name of Contact Person at () Area Code & Daytime Telephone N | | Code & Daytime Telephone Number | | | |
| Enclosed is a check fo | r the following amount made | payable to the Florida De | partment of State: | | | |
| S35 Filing Fee | □S43.75 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) | | | |
| Ami Div P.O | iling Address endment Section ision of Corporations . Box 6327 ahassee, FL 32314 | Ame Divi: Clift | et Address ndment Section sion of Corporations on Building Executive Center Circle | | | |

Tallahassee, FL 32301

FILED

Articles of Amendment 17 SEP 27 AM 9: 17 Articles of Incorporation of Bartis And Street Street

| DECAR GROUP CORP | MOLAHASSIE FEBRIDA |
|--|--|
| (Name of Corporation as | s currently filed with the Florida Dept. of State) |
| P13000015075 | |
| (Document | Number of Corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida Statits Articles of Incorporation: | tutes, this Florida Profit Corporation adopts the following amendment(s) to |
| A. If amending name, enter the new name of the corpor | ration: |
| N/A | The new |
| name must be distinguishable and contain the word "c "Corp.," "Inc.," or Co.," or the designation "Corp," "I word "chartered," "professional association," or the abbr | corporation," "company," or "incorporated" or the abbreviation lnc," or "Co". A professional corporation name must contain the reviation "P.A." |
| P. Vater new principal office address if applicables | N/A |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRES</u> | <u></u> |
| | |
| | |
| C. Enter new mailing address, if applicable: | NUA. |
| (Mailing address MAY BE A POST OFFICE BOX) | N/A |
| | |
| | |
| | |
| D. If amending the registered agent and/or registered of | office address in Florida, enter the name of the |
| new registered agent and/or the new registered offic | ce address: |
| Name of New Registered Agent N/A | |
| | |
| | (Florida street address) |
| New Registered Office Address: | , Florida |
| | (City) (Zip Code) |
| | |
| | |
| New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I an | |
| Thereby accept the appointment as regimered agent. Tur | The state of the s |
| | |

Signature of New Registered Agent, if changing

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> | John Doe | |
|----------------------------|---|-------------------|-----------------------|
| X Remove | <u>v</u> | Mike Jones | |
| X Add | <u>sv</u> | Sally Smith | |
| Type of Action (Check One) | Title | <u>Name</u> | <u>Addres</u> s |
| 1) Change | D | JORGE DE CARDENAS | 10885 NW 89 TER # 213 |
| X Add | | | DORAL, FL 33178 |
| Remove | | | |
| 2) Change | D | LUIS DE CARDENAS | 10885 NW 89 TER # 213 |
| X Add | | | DORAL, FL 33178 |
| Remove | | | |
| 3) Change | | | |
| Add | | | |
| Remove | | | |
| 4) Change | | | |
| Add | | | |
| Remove | | | |
| 5) Change | | | |
| Add | | | |
| Remove | | | · |
| δ) Change | | | |
| Add | *************************************** | | |
| Remove | | | |

| E. If amending or adding additional Articles, enter change(s) (Attach additional sheets, if necessary). (Be specific) | h <u>ere</u> : |
|---|----------------------------------|
| N/A | |
| D/A | |
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| F. If an amendment provides for an exchange, reclassification | or cancellation of issued shares |
| provisions for implementing the amendment if not contain | ed in the amendment itself: |
| (if not applicable, indicate N/A) | |
| N/A | |
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| | 09/22/2017 | |
|---|---|----------------------------------|
| The date of each amendment(s) | adoption: | , if other than the |
| date this document was signed. | | |
| O9 Effective date if applicable: | /22/2017 | |
| Enective date <u>n applicable</u> . | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in this document's effective date on the | block does not meet the applicable statutory filing requirements, this Department of State's records. | s date will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| ■ The amendment(s) was/were a by the shareholders was/were | dopted by the shareholders. The number of votes east for the amendme sufficient for approval. | ent(s) |
| | pproved by the shareholders through voting groups. The following state or each voting group entitled to vote separately on the amendment(s): | ement |
| | st for the amendment(s) was/were sufficient for approval | |
| by | ,,, | |
| | (voting group) | |
| | dopted by the board of directors without shareholder action and shareholder | older |
| ☐ The amendment(s) was/were a action was not required. | dopted by the incorporators without shareholder action and shareholder | • |
| 09/22/20 Dated | 17 | |
| selec | Auda Cardenes director, president or other officer – if directors or officers have not be ted, by an incorporator – if in the hands of a receiver, trustee, or other of inted fiduciary by that fiduciary) | |
| | RAUL DE CARDENAS | |
| | (Typed or printed name of person signing) | |
| | DIRECTOR | |
| | (Title of person signing) | |