P13000024229

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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: DMA ROUGILG COMPORATION DOCUMENT NUMBER: P 30000 24229
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Tampa DW:5
DMA Doofing Corporation
1625 SW 15+Way #15
Delifield ben Fl 33441
E-mail address: (to be used for future annual) report notification)
For further information concerning this matter, please call:
Name of Contact Person at (454) 531 1456 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

to

Art	ticles of Incorporation			
DMA ROI	ofing (or	poration	\	
(Name of Corporation	as currently filed with the	Plorida Dept. of State	2)	
P 130000	26279		r	
(Document	t Number of Corporation (if	known)		
Pursuant to the provisions of section 607.1006, Florida St its Articles of Incorporation:	tatutes, this Florida Profit Co	orporation adopts the	following amendm	ient(s) to
A. If amending name, enter the new name of the corpo	oration:			
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the abl	"Inc," or "Co". A professi			on
B. Enter new principal office address, if applicable:				
(Principal office address <u>MUST BE A STREET ADDRE</u>	<u>ESS</u>)			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			2011 807 2	TI
			Are P	
D. If amending the registered agent and/or registered		enter the name of the		
new registered agent and/or the new registered off	ice address:		<u>u</u> —	
Name of New Registered Agent				
	(Florida street address)	· <u> </u>		
New Registered Office Address:		, Florida_		
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing Registe	ered Agent			
I hereby accept the appointment as registered agent. I a		he obligations of the pe	osition.	
Signatu	re 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> <u>John L</u>	<u>Doe</u>	
X Remove	V Mike	Jones .	
<u>X</u> Add	SV Sally S	<u>Şmith</u>	
Type of Action (Check One) 1) Change Add Remove	Title	Name Jamel DW15	Address 1348 St 7th St Delryseld beh F 33441
2) Change Add Remove			
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add Remove			

Attach <i>additi</i>	or adding additional Art onal sheets, if necessary).	(Be specific)			
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f an amendi	ment provides for an exc for implementing the am	hange, reclassific	ation, or cancella	tion of issued share	<u>es.</u>
(if not a	pplicable, indicate N/A)	.nament ii not co	mtanet in the an	ienoment reserr.	
			<u> </u>		··· -
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The date of each amendment(s) adoption:, if other than the date this document was signed.
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 date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (<u>CHECK ONE</u>)
☐ 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
Signature AMMA DAWA
(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)
Tamra DWIS
(Typed or printed name of person signing)
President
(Title of person signing)