P1300045916

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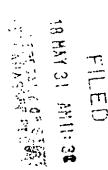
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COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPORA	ATION: Doxilas	D. Clark, Inc	<u></u>
DOCUMENT NUMBI	er: <u>P1300004</u>	5916	
The enclosed Articles of	f Amendment and fee are su	ibmitted for filing.	
Please return all corresp	ondence concerning this ma	itter to the following:	
_	Douglas	D. Clark Name of Contact Perso	
		Name of Contact Perso	n
_	Douglas	D. Clark In	· · · · ·
	<i>Y</i>	Firm/ Company	
	7104 13	"ST E	
_		Address	
			243
_		FL. 342 City/ State and Zip Cod	c
	E-mail address: (to be us	ctrealty Egma, sed for future annual report	notification)
For further information of	concerning this matter, pleas	se call:	
Daylos D	· Clark	at (941	de & Daytime Telephone Number
/ Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Depa	artment of State:
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐S43.75 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 Tallahassee, FL 32314

Street Address
Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

to

Articles of Incorporation

 \mathbf{of}

Douglas D. Clark, Inc	
(Name of Corporation as cu	currently filed with the Florida Dept. of State)
P 130m 45916	
(Document Nur	umber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corporati	tion:
_	The new
name must be distinguishable and contain the word "corp "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc. word "chartered," "professional association," or the abbrevio	poration," "company," or "incorporated" or the abbreviation " or "Co". A professional corporation name must contain the
B. <u>Enter new principal office address if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRESS</u>))
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office a	ce address in Florida, enter the name of the
Name of New Registered Agent	
(Flor	orida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered A hereby accept the appointment as registered agent. I am fam	Agent: miliar with and accept the obligations of the position.
Signature of i	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>Joh</u>	n Doe	
X Remove	<u>V</u> <u>Mil</u>	se Jones	
\underline{X} Add	<u>SV</u> <u>Sall</u>	ly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	PD	Douglas D. Clark	7104 13th ST E.
Add			SARASOTA FL.
Remove			34243
2) Change	PD	Monica L. Clark	7/04 /3th ST E.
Add			SARASCIA, FL
X Remove			34243
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) 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)
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)
Cy mir approximated (mir)

The date of each amendment(s) adoption: May 15th 2018, if other than the date this document was signed.
Effective date if applicable: MAY 15 ^{+L} 2018 (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) (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.
Dated5/15/2018
Signature None Della
(By a direosoft, 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)
Typed or printed name of person signing)
(Týped or printed name of person signing)
Vice President / Director (Title offerson signing)