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THE TRANSPORT OF STATE

JUN 2 8 2017 T. LEMIEUX



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: DANWEST INC		
DOCUMENT NUMB	D12000054020		
The enclosed Articles of	f Amendment and fee are sub	omitted for filing.	
Please return all corres	condence concerning this mat	ter to the following:	
	Dan Westuba		
-		Name of Contact Person	
	Danwest Inc		
-		Firm/ Company	
	11333 Emerald Shore Dr		
•		Address	
Riverview, FL 33579			
-	•	City/ State and Zip Code	
danwe	est23@hotmail.com		
4	•	ed for future annual report	notification)
	concerning this matter, pleas		727 7041
Dan Westuba		at (
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made p	payable to the Florida Depa	rtment 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 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 of

DANWEST INC				
(Name o	of Corporation as curren	tly filed with the Florida Der	ot. of State)	
P13000054020				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation a	idopts the following	g amendment(s) to
A. If amending name, enter the new na	ame of the corporation:			
				Ti.
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co" A professional corpor		
B. Enter new principal office address,		11333 Emerald Shore Dr		
(Principal office address <u>MUST BE A S</u>		Riverview, FL 33579	Riverview, FL 33579	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		11333 Emerald Shore Dr		
		Riverview, FL 33579		
				
D. If amending the registered agent an			me of the	
new registered agent and/or the new	w registered office addre	<u> </u>		
Name of New Registered Agent				
	11333 Emerald Shore D	r 		
	(Florida :	street address)		
New Registered Office Address:	Riverview		_, Florida	
		(City)	(Zip C	Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist			ne of the nocition	
Thereby accept the appointment as regist	егей адет. Тат јатта	with and accept the obligation	ns of the position.	
				30.00
		4		
	Signature of New	Registered Agent, if changing	5 -	Constant
			T T	
			97 7	المسارة

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 Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change	VP	_	Mary Everhart Westuba	11333 Emerald Shore Dr
XAdd				Riverview, FI 33579
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
, S		_		
Remove				
Kemore				
6) Change		_		
Add				
Remove				

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
If an amendment provides for an excl	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	endment if not contained in the amendment itself:
	
	•
	· · · · · · · · · · · · · · · · · · ·

Effective date if applicable: (no more than 90 days after amendment file date)	
(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 document's effective date on the Department of State's records.	e listed as the
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)	
(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 6/14/17	
Signature	
(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)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President -	