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TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations D D RELOCATION INC. NAME OF CORPORATION: **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **IRIS DAHAN** Name of Contact Person D D RELOCATION INC. Firm/ Company 3255 N.E. 184TH STREET, APT. 12310 Address AVENTURA, FLORIDA 33160 City/ State and Zip Code IRIS1_DAHAN@HOTMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: IRIS M. DAHAN Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address **Street Address** Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Articles of Amendment to Articles of Incorporation of

D D RELOCATION INC.			Pic II			
(<u>Name</u>	of Corporation as curren	tly filed with the Florida Dept. of S	tate)			
P13000080413			The The			
	(Document Number	of Corporation (if known)				
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this	s Florida Profit Corporation adopts	he following amendment			
A. If amending name, enter the new na	ame of the corporation:					
			The new			
name must be distinguishable and con "Corp.," "Inc.," or Co" or the design word "chartered," "professional associa	nation "Corp," "Inc," or	"Co". A professional corporation	" or the abbreviation			
B. Enter new principal office address,	if applicable:	3255 N.E. 184TH STREET, SUITE #12310				
(Principal office address <u>MUST BE A S</u>		AVENTURA, FLORIDA 33160				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		3255 N.E. 184TH STREET, SUITE #12310				
		AVENTURA, FLORIDA 33160	·			
						
D. If amending the registered agent an new registered agent and/or the new			<u>he</u>			
	IRIS DAHAN	<u></u>				
Name of New Registered Agent	3255 N.E. 184TH STREE	OT CHITE #12210				
		treet address)				
	AVENTURA		33160			
New Registered Office Address:		, Flor (City)	(Zip Code)			
		(-15)	(
New Registered Agent's Signature, if c						
I hereby accept the appointment as regist	tered agent. I am familiah	with and accept the obligations of th	e position.			
	De					
	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 Do	<u>e</u>		
X Remove	<u>v</u>	Mike Jo	nes		
<u>X</u> Add	<u>sv</u>	Sally Sn	<u>oith</u>		
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s
1) Change					
Add					
Remove					
2) Change		_			
Add					
Remove					
3) Change					
Add					
Remove					
4) Change			_		
Add		_	·	•	
Remove					
5) Change					
Add		_		•	
Remove					
6) Change		_			, and
Add					***
Remove					

	necessury).	(Be specific)			
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If an amendment provides	for an excha	nge, reclassific	ation, or cancellat	ion of issued shares	,
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The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(no more than 90 days after amenament file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we document's effective date on the Department of State's records.	rill not be listed as the
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	
SHAREHOLDERS "	
(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. 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) IRIS DAHAN	FILED 16 JUL 18 AM 10: 36
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	