P14000008184

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
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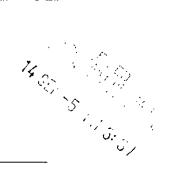
Andrad Mand

COVER LETTER

Division of Corpo						
NAME OF CORPOR	ation: D'COVERI	NGS INC.				
DOCUMENT NUMBER: P1400008184						
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this ma	tter to the following:				
	VOLKAN BOZDIK & TAYLAN OZHAN					
		Name of Contact Person	n			
	D'COVERINGS I	NC.				
		Firm/ Company				
	2294 NW 82ND A	AVE				
		Address				
	MIAMI, FL 33122	<u> </u>				
		City/ State and Zip Cod	e			
INF	O@DCOVERING	SS.COM				
	_	sed for future annual report	notification)			
For further information	concerning this matter, pleas	se call:				
VOLKAN BO	ZDIK	at (786	, 547-7635			
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:						
■ \$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)			
Mail	ing Address	Street Address				
	ndment Section	Amendment Section				
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building						
Tallahassee, FL 32314 2661 Executive Center Circle						

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of



D'COVERINGS INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

endment(s) to

(Document Number	of Corporation	ı (if known)	
Pursuant to the provisions of section 607,1006, Flor its Articles of Incorporation:	rida Statutes, th	nis Florida Profit Corporation adopts the followin	
A. If amending name, enter the new name of the	corporation:		
name must be distinguishable and contain the w "Corp" "Inc.," or Co" or the designation "Co word "chartered," "professional association," or t	rp," "Inc." o	r "Co" A professional corporation name must	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		2294 NW 82ND AVE	
		MIAMI, FL 33122	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2294 NW 82ND AVE	
- imaidie addiess well be a rosi of the	SUX)		
(maing dairess MAT BE A LOST OFFICE L	<u>80x</u>)	MIAMI, FL 33122	
	stered office a	idress in Florida, enter the name of the	
D. If amending the registered agent and/or registered agent and/or the new registered Name of New Registered Agent	stered office a	ddress in Florida, enter the name of the ess:	
D. If amending the registered agent and/or regis new registered agent and/or the new registered Name of New Registered Agent	ntered office aged office addr	ddress in Florida, enter the name of the ess:	

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	V	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Р	TAYLAN OZHAN	20355 NE 34TH CT #429
Add			AVENTURA, FL 33180
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E.	If amending or adding additional Artic	cles, enter chang	e(s) here:		
	(Attach additional sheets, if necessary).	(Be specific)			
-					· · · · · · · · · · · · · · · · · · ·
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-				<u></u>	
					
F.	If an amendment provides for an exch	ange, reclassifica	ation, or cancella	tion of issued sha	res,
	provisions for implementing the amer (if not applicable, indicate N/A)	<u>idment if not co</u> i	ntained in the am	endment itself:	
	(i) not appreame, materie Nest)				
				100	7100
					
			7-1		
				-	
				·	

The date of each amendment(s) adoption: date this document was signed.		, if other than th
Effective date if applicable: 09/01/2014		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CH	ECK ONE)	
The amendment(s) was/were adopted by the sby the shareholders was/were sufficient for a	shareholders. The number of votes east for the amendment(s) pproval.	
	shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amen	dment(s) was/were sufficient for approval	
by		
(voti	ing group)	
The amendment(s) was/were adopted by the laction was not required.	board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted by the i action was not required.	incorporators without shareholder action and shareholder	
Dated	,12014	
Signature	mull	
(By a director, presi	dent or other officer – if directors or officers have not been rporator – if in the hands of a receiver, trustee, or other court by that fiduciary)	_
VOLKAN	BOZDIK	
	(Typed or printed name of person signing)	
PRESIDE	ENT	
	(Title of person signing)	