## P14000048358

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION	N: DANCAR BUSINI	ESS CORP	
DOCUMENT NUMBER:	14000048358		
The enclosed Articles of Ame		bmitted for filing.	
Please return all corresponden	ce concerning this mat	tter to the following:	
WILSO	N DANIEL JAYKOS	SZ JR	
		Name of Contact Person	1
DANC	AR BUSINESS CORI	· .	
		Firm/ Company	
1835 N	E MIAMI GARDENS	DR. SUITE 259	
·		Address	
MIAM	I BEACH, FL 33179		
		City/ State and Zip Code	)
DANIEL@E	SSENTIALMSB.CON	1	
——————————————————————————————————————	mail address: (to be us	ed for future annual report	notification)
For further information concer		e call: at ( <sup>954</sup>	<b>.</b> 246-4496
Name of Conta	ct Person		) de & Daytime Telephone Number
Enclosed is a check for the fol			
	\$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 Ad Amendment Division of P.O. Box 63 Tallahassee,	Section Corporations 27	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of

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(Name	of Corporation as current	ly filed with the Florida Dept. of State)	
P14000048358			
	(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the foll	lowing amendment(s)
A. If amending name, enter the new n	ame of the corporation:		5≠
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa  B. Enter new principal office address, (Principal office address MUST BE A S  C. Enter new mailing address, if applications address MAY BE A POST	ation "Corp," "Inc," or tion," or the abbreviation if applicable: TREET ADDRESS  icable:	on," "company," or "incorporated" or 1 "Co". A professional corporation name "P.A."  1835 NE MIAMI GARDENS DR.  SUITE 259  MIAMI BEACH, FL 33179  MIAMI BEACH, FL 33179	The new the abbreviation the sust contain the sust contains contain the sust contains contain the sust contains contain the sust contains conta
D. If amending the registered agent an new registered agent and/or the new		ress in Florida, enter the name of the	
Name of New Registered Agent	WILSON JAYKOSZ	_	
Name of New Registered Agent	1835 NE MIAMI GARDI	ENS DR.	
	(Florida st	reet address)	
New Registered Office Address:	MIAMI BEACH	, Florida	79
		(City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	ered agent. I am familiar	with and accept the obligations of the posi	tion.
	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>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>nes</u>	
_X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change	OPS		THIAGO MIRANDA	1001 BRICKELL BAY DR
Add				SUITE 1606
X Remove				MIAMI, FL 33131
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

, , , , , , , , , , , , , , , , , , , ,	). (Be specific)
······································	
<b></b>	
If an amendment provides for an exc provisions for implementing the am	change, reclassification, or cancellation of issued shares, nendment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
	-

• •	08/31/2016		
The date of each amendment(s) date this document was signed.	adoption:		_, if other than th
	/01/2016		
Effective date <u>if applicable</u> :	(no more than 90 days aj	fter amendment file date)	
Note: If the date inserted in this document's effective date on the		tutory filing requirements, this date will n	not be listed as th
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number sufficient for approval.	of votes cast for the amendment(s)	
	pproved by the shareholders through voti or each voting group entitled to vote sepa		
"The number of votes ca	st for the amendment(s) was/were sufficient	ent for approval	
by	(voting group)		
	(voting group)		
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without	shareholder action and shareholder	
The amendment(s) was/were a action was not required.	dopted by the incorporators without share	eholder action and shareholder	
08/31/20 Dated	16	The same of the sa	
Signature	director, provident or other officer – if d	iractors or officers have not been	-
	ted, by an incorporator – if in the hands of		
	inted fiduciary by that fiduciary)	, , , , , , , , , , , , , , , , , , , ,	
	WILSON JAYKOSZ JR		
·	(Typed or printed name of	person signing)	<del></del>
	CEO		
	(Title of person	n signing)	