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SECRETARY OF STATE

C. GOLDEN
JUL 1 0 2018

COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPO	PRATION: DK Strategic Solu	tions, Inc.	
DOCUMENT NUM	IBER: P14000059780		
	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	Alex Rodriguez		
		Name of Contact Person	1
	FL Tax Group, Inc.		
	<u> </u>	Firm/ Company	
	8461 Lake Worth Road #110		
		Address	
	Wellington, FL 33467		
		City/ State and Zip Cod	e
Ale.	x@FLTaxGroup.com		
	- ·	sed for future annual report	notification)
For further informati	on concerning this matter, pleas	se call:	
Alex Rodriguez		954 at (999-3730
Name	of Contact Person	at (954) 999-3730 Area Code & Daytime Telephone Numb	
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
S35 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		Amend Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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DK STRATEGIC SOLUTIONS, INC. SECRETARY OF STATE (Name of Corporation as currently filed with the Florida Dept. of StafALL AHASSEE. FLORIDA P14000059780 (Document Number of Corporation (if known) Pursuant to the provisions of section 607,1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp." "Inc.," or Co.," or the designation "Corp." "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A. 1701 West Hilsboro Blvd. B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Suite 209 Deerfield Beach, FL 33442 C. Enter new mailing address, if applicable: 1701 West Hilsboro Blvd. (Mailing address MAY BE A POST OFFICE BOX) Suite 209 Deerfield Beach, FL 33442 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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:

 $P \sim President; V = Vice President; T = Treasurer; S \sim Secretary; D = Director; TR = Trustee; C \sim Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer'director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		<u> </u>	
Add			
Remove			
Change .			
6) Change			
Add			
Remove			

atach additional sheets, if necessary). (Be specific)			
			.	
				
		<u> </u>		-
<u> </u>				
				
f an amendment provides for an ex	change reclassification	or cancellation of is	sued shares.	
provisions for implementing the ar	mendment if not contain	ed in the amendment	itself:	
provisions for implementing the ar (if not applicable, indicate N/A)				
				

The date of each amendment(s) adoption:	, if other than the
Effective data if applicables	
(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 document's effective date on the Department of State's records.	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	
by	
☐ 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	
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)	
(MESIDENT	
(Title of person signing)	