# P14000068350

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#### **COVER LETTER**

TO: Amendment Section Division of Corporations				
NAME OF CORPORATION: DSTD CO				
DOCUMENT NUMBER: 714000068350				
The enclosed Articles of Amendment and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:				
Johama Jimerez Name of Contact Person				
DSTDCo				
3749 N. Federal Hwy.				
Pompano Beach FC 33064				
City/ State and Zip Code  DSTD L a live. Com.  E-mail address: (to be used for future annual report notification)				
For further information concerning this matter, please call:				
Johanna Jimenez at 786, 667-2873				
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 Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  \$43.75 Filing Fee & Certificate of Status  Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section  Street Address Amendment Section				
Division of Corporations  Amendment Section  Division of Corporations				

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

### **Articles of Amendment Articles of Incorporation**

## (Name of Corporation as currently filed with the Florida Dept. of State) P14 000068350

it(s) to

(Document Number of Cor	poration (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida</i> Articles of Incorporation:	ida Profit Corporation adopts the following amendme
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". word "chartered." "professional association," or the abbreviation "P.A.	A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
_	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
(mailing dualess <u>mail beat fost of free box</u> )	
<del>-</del>	
_	
D. If amending the registered agent and/or registered office address i	n Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
	and the second s
(Florida street ad	ldress)
New Registered Office Address:	, Florida
(City,	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar with a	and accept the obligations of the position.
	· · · ·
Nanature of New Regist	ered 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	PT John Do	<u>oe</u>	
X Remove	V Mike Jo	<u>ones</u>	
X Add	SV Sally Sr	n <u>ith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	エ	taul A. Paolino	2875 Spanish River Rd
X Add			Boca Ration
Remove			FL 33432.
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

* */	(Be specific)
f an amendment provides for an exch	ange, reclassification, or cancellation of issued shares,
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, indicate in the amendment itself:
If an amendment provides for an exch provisions for implementing the amen (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and and an and an and an and an and an and an an and an and an an and an and an
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and and and an and an and an
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and and and an and an and an
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and and an amendment itself:
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and and an
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and and in the amendment itself:
provisions for implementing the amer	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

The date of each amendment(s) adoption: 08-10-16.  date this document was signed.	, if other than the
Effective date if applicable:    08   10   20   6	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will 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"  (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 find ciary by that fiduciary)	
(Typed or printed name of person signing)  President.  (Title of person signing)	