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## **COVER LETTER**

TO: Amendment Section

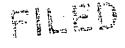
Division of Corporations

NAME OF CORPORATION: \_\_\_\_\_ DIZAL GROUP, CORP. DOCUMENT NUMBER: P15000001746 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: RAUL ROMAN VALIDO Name of Contact Person DIZAL GROUP CORP Firm/ Company 6854 NW 173 DR Address HIALEAH, FL 33015 City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (786 ) 201-5572

Area Code & Daytime Telephone Number **RAUL ROMAN VALIDO** Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



DIZAL GROUP, CORP.

16 APR 18 PH 1:53

	LULAN OF RTATE
(Name of Corporation as currently	y filed with the Florida Dept of State EE, FLORIDA
215000001746	TALLATIAL
(Document Number of	Corporation (if known)
ursuant to the provisions of section 607.1006, Florida Statutes, this as Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(
. If amending name, enter the new name of the corporation:	
	The new
ame must be distinguishable and contain the word "corporation Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "corporation" or "corporation".	Co". A professional corporation name must contain the
Enter new principal office address, if applicable:	6854 NW 173 DR
Principal office address <u>MUST BE A STREET ADDRESS</u> )	HIALEAH, FL 33015
. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6854 NW 173 DR
(Mauring duaress MAT BE A FOST OFFICE BOX)	HIALEAH, FL 33015
<ol> <li>If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address</li> </ol>	
RAUL ROMAN VALIDO	
Name of New Registered Agent	
(Florida str	reet address)
(Florida strange) New Registered Office Address:	reet address) . Florida 33015

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.

X Change	<u>PT</u>	John Doe	
X Remove	¥	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PT	JEAN CARLOS DIAZ ALDORASI	3515 NW 113 COURT
Add			DORAL, FL 33178
X Remove			
2) Change	PT	RAUL ROMAN VALIDO	6854 NW 173 DR
X Add			HIALEAH, FL 33015
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	icles, enter change(s) here: (Be specific)
N/A	
<del></del>	
<del></del>	
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F. If an amendment provides for an exclusions for implementing the amount of the second secon	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(+)0 . It 1.4 - It	
(if not applicable, indicate N/A)	
(if not applicable, indicate N/A) N/A	

The date of each amendment date this document was signed	t(s) adoption:	, if other than the
Effective date if applicable:	APRIL 17, 2016	
<u> </u>	(no more than 90 days after amendment file date)	
Note: If the date inserted in document's effective date on the	this block does not meet the applicable statutory filing requirements, this date wi he Department of State's records.	ll not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/wei by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
☐ The amendment(s) was/wer must be separately provide	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by	25	
	(voting group)	
☐ The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
APRI Dated	L 13, 2016	
Signature	Venter - XIX	
( <u>B</u>	y a director, president or other officer - if directors or officers have not been	<del></del>
	elected by an incorporator - if in the hands of a receiver, trustee, or other court	
ар	opointed fiduciary by that fiduciary)	
	JEAN CARLOS DIAZ ALDORASI	
	(Typed or printed name of person signing)	<u></u>
	PRESIDENT	
	(Title of person signing)	