PISWW9132

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JUL 17 2015 R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: DITA GROUP INC				
DOCUMENT NUMBER: P15000009122				
The enclosed Articles of Amendment and fee are sul	bmitted for filing			
Please return all correspondence concerning this mat	ter to the following:			
MIGUEL P. MITCHELL				
	Name of Contact Persor			
DITA GROUP INC				
	Firm/ Company			
2300 55TH ST SW	· ····································			
Address				
NAPLES, FL 34116				
	City/ State and Zip Code	2		
MPMITCHELL@DITAENGINEE	RING.COM			
_	ed for future annual report	notification)		
`	•	•		
For further information concerning this matter, pleas	e call:			
MIGUEL P. MITCHELL	at (239	290-4270		
Name of Contact Person	Area Co	de & 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 & 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

图过多则

DITA GROUP INC		15 JUL 16 PM 1:50
(<u>Name o</u> P15000009122	of Corporation as current	ly filed with the Florida Dept. of State) N + 1418 IALLAHASSEE, FLORIDA
	(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 following amendment(s) to
A. If amending name, enter the new na	ime of the corporation:	
		The new
	ation "Corp," "Inc," or	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
B. Enter new principal office address,	if applicable:	2940 HORSESHOE DR S. UNIT 400
(Principal office address MUST BE A STREET ADDRESS)		NAPLES, FL 34104
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2940 HORSESHOE DR S. UNIT 400
(**************************************		NAPLES, FL 34104
D. If amending the registered agent an new registered agent and/or the new		
Name of New Registered Agent	LISANDRA ALMENAR	EZ PEÑA
	2300 55TH ST SW	·
	(Florida si	reet address)
New Registered Office Address:	NAPLES	, Florida
		(City) (Zip Code)
		1: with and accept the obligations of the position.
<u>*</u>	Signature of New	Registered Agent, if changing
	X	

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.

<u>X</u> 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)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	T	MAYKEL ORAMAS SANCHEZ	2300 55TH ST SW
Add			NAPLES, FL 34116
Remove			
2) Change	Т	JOSE IRIBAR JR.	2184 55TH ST SW
Add			NAPLES, FL 34116
X Remove			
3) Change	<u>P</u>	LISANDRA ALMENAREZ PEÑA	2300 55TH ST SW
X Add			NAPLES, FL 34116
Remove			
4) Change			
A dd			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			<u></u>

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
	,
· · · · · · · · · · · · · · · · · · ·	·····
If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	

, · •	07/14/2015	
The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
	14/2015	
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this epartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes cast for the amendmen ufficient for approval.	it(s)
	proved by the shareholders through voting groups. The following states reach voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	**	
<u> </u>	(voting group)	
action was not required.	opted by the board of directors without shareholder action and shareholder opted by the incorporators without shareholder action and shareholder	der
07/14/2019 Dated Signature		
selecte	director, president or other officer – if directors or officers have not been do, by an incorporator – if in the hands of a receiver, trustee, or other extend fiduciary by that fiduciary)	
	MIGUEL P. MITCHELL	
	(Typed or printed name of person signing)	
	VICEPRESIDENT	
	(Title of person signing)	