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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	DS BLADEN II	NC.	
DOCUMENT NUMBER	P15000046301		
The enclosed Articles of A	Amendment and fee are sul	omitted for filing.	
Please return all correspon	ndence concerning this mat	ter to the following:	
N	IARSHA SIHA		
		Name of Contact Person	1
II	NCFILE.COM L	LC	
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		Address	
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_		City/ State and Zip Code	•
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	E-mail address: (to be us	ed for future annual report	notification)
For further information co	oncerning this matter, pleas	se call:	
MARSHA SIF	1Δ	at (888	, 462-3453 X 701
		at ( GGG	de & Daytime Telephone Number
Name of C	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for th	e following amount made	payable to the Florida Depa	ertment of State:
■ \$35 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)
	g Address		Addr <u>ess</u>
Amendment Section		Amendment Section	
	n of Corporations ox 6327		on of Corporations  Building

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

DS BLADEN INC.

(Name of Corporation as currently: P15000046301 P15000046301	filed with the Florida Dept. of State)	
(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Fl</i> its Articles of Incorporation:	orida Profit Corporation adopts the following amendment	ent(s) to
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation," "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc," or "Coword" chartered," "professional association," or the abbreviation "P.	o". A professional corporation name must contain the	n
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)	2115 SEP -8	<b>海岛西部</b>
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:  Name of New Registered Agent	ss in Florida, enter the name of the	OF STATE W
(Florida stree	t address)	
New Registered Office Address: (0	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar wit		·
Signature of New Ber	sistered 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 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	SEC	NIVANH BLADEN	15610 1ST ST EAST
X Add			Redington BeachFL33708
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4)Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change		_	
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
· · · · · · · · · · · · · · · · · · ·	
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
·	

Change.jpg		https://mail.google.com/_/scs/mail-static/_/js.	/k=gmail.main.en
	The date of each amendment(s) adoption date this document was signed.	ption:	, if other t
	Effective date if applicable:		
		(no move than 90 days after amendment file date)	
	Note: If the date inserted in this blocdocument's effective date on the Depa	ck does not meet the applicable statutory filing requirements, this date will n rtment of State's records.	ot be listeć
	Adoption of Amendment(s)	(CHECK ONE)	
	☐ The amendment(s) was/were adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes east for the amendment(s) cient for approval.	
	☐ The amendment(s) was/were appromust be separately provided for ea	ved by the shareholders through voting groups. The following statement such voting group entitled to vote separately on the amendment(s):	
	"The number of votes cast for	r the amendment(s) was/were sufficient for approval	
	. by	(voting group)	
	The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action and shareholder	
	The amendment(s) was/were adopt action was not required.	ed by the incorporators without shareholder action and shareholder	
	Septembe	r 4 2015	4
	DatedSignature	Dorla Blad	
	selected,	ector, president or other officer – if directors or officers flave not been by an incorporator – if in the hands of a receiver, trustee, or other court I fuluciary by that fiduciary)	
	C	ouglas Bladen	
	n-ma	(Typed or printed name of person signing)	
	F	PRESIDENT	
		(Title of person signing)	1