Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : AGI REGISTERED AGENTS, INC.

Account Number: I20000000205

Phone

: (305)416-6800

Fax Number

: (305)416-6811

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Cmail.	Address:				
CINGLE	AUUI ESS.				

COR AMND/RESTATE/CORRECT OR O/D RESIGN DC ING, INC.

Certificate of Status	0
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Estimated Charge	\$35.00

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COVER LETTER

Division of Corporations		
NAME OF CORPORATION: DC ING, INC.	······································	
DOCUMENT NUMBER: P15000051900		
The enclosed Articles of Amendment and fee are sul	omitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
Diane M. Hernandez		
	Name of Contact Person	
Adams Gallinar, P.A.		
	Firm/ Company	
1000 Brickell Avenue, Suite 3	00	
	Address	
Miami, Florida 33131		
	City/ State and Zip Code	
dhernandez@agilaw.com		
	ed for future annual report notification)	
2		
For further information concerning this matter, pleas	e call:	
Diane M. Hernandez	at (305) 416-6800	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount made p	nayable to the Florida Department of State:	
\$35 Filing Fee Certificate of Status	Certified Copy (Additional copy is enclosed) \$\int \frac{1}{3}\$.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	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

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Articles of Amendment to Articles of Incorporation of

Articles of Income of	rporation			
DC ING,	INC.			
(Name of Corporation as currently	filed with the Florida Dept. of State)			
P15000051900				
(Document Number of C	Corporation (if known)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this Frits Articles of Incorporation:	lorida Profit Corporation adopts the follo	wing amen	ıdınen	ıt(s) to
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 "C word "chartered," "professional association," or the abbreviation "P	o". A professional corporation name m	e abbrevia ust contain	ition 1 the	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			<u> </u>	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			16 AFR -	Const.
D. If amending the registered agent and/or registered office address:	as in Florida, enter the name of the		-µ AM 10: 36	
Name of New Registered Agent				
(Florida stree	et address)			
New Registered Office Address:	, Florida	Clin Coda)		
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am famillar wi	ith and accept the obligations of the positi	Zip Code) on.		
Signature of New Re	gistered Agent, if changing			

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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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name .	Address
1)Change	DPST	VICTOR DIEGO CABOS	2950 SW 27 Avenue
Add			#320
XX Remove			Miami, FL 33133
2) Change	DPST	LUIS TONDI	2950 SW 27 Avenue
XX Add			#320
Remove			Miami, FL 33133
3) Change		-	
Add			
Remove			
4) Change			
Add			·
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			(((H16000083611 3)))

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	if necessary). (es, enter change (Be specific)	·			
			-			
						
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				- <u>-</u>		
					<u> </u>	
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	Jac fau en aughai	nga saslassifias	tion or appealle	tion of inequal sha	. water	
	enting the amend	Iment if not con	tained in the an	endment itself:	11 621	
ovisions for impleme						
an amendment provi rovisions for implement (if not applicable, i	ndicate N/A)					
ovisions for impleme	ndicate N/A)					
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The date of ea date this docun		nent(s) adoption: ned.	·	, if other than the
Effective date	if applicabl	<u>le:</u>		
			(no more than 90 days after amendment file date)	
			s not meet the applicable statutory filing requirements, thi of State's records.	s date will not be listed as the
Adoption of A	mendment((s) (g	CHECK ONE)	
		were adopted by (s/were sufficient f	ne shareholders. The number of votes cast for the amendment approval.	ent(s)
			the shareholders through voting groups. The following staining group entitled to vote separately on the amendment(s):	lement
'The	number of v	otes cast for the ar	nendment(s) was/were sufficient for approval	
by	······································			
		(voting group)	
	ment(s) was/ not required.		ne board of directors without shareholder action and shareh	older
	ment(s) was/ not required.		ne incorporators without shareholder action and shareholde	r .
	Mated Dated Signature		Radorest	·
		selected, by an i	scident or other officer – if firectors or officers have not be accorporator – if in the hands of a receiver, trustee, or other ary by that fiduciary)	en court
		Robert R	Adams, Esq.	
			(Typed or printed name of person signing)	
		Authoriz	ed Representative	
			(Title of person signing)	