P15000060890

(Re	equestor's Name)	<u> </u>
(Ad	dress)	
(Ad	ldress)	
(Cit	ry/State/Zip/Phone	e #)
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(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
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12/11/01

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

11101101. 030 330 1300						
ACCOUNT NO. : I2000000195						
REFERENCE : 726875 8056768						
AUTHORIZATION :						
COST LIMIT : \$ 35.00						
ORDER DATE : July 29, 2015						
ORDER TIME : 12:57 PM						
ORDER NO. : 726875-005						
CUSTOMER NO: 8056768						
DOMESTIC AMENDMENT FILING						
NAME: DDH SERVICES, INC.						
EFFECTIVE DATE:						
XX ARTICLES OF AMENDMENT RESTATED ARTICLES OF INCORPORATION						
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:						
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING						

EXAMINER'S INITIALS:

CONTACT PERSON: Melissa Zender -- EXT# 62956

Articles of Amendment to Articles of Incorporation of

DDH SERVICES, INC.		
(Name of Corporation as curren	tly filed with the Florida Dept. of State)	
P15000060890		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the fol	lowing amendment(s)
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporate "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name	the abbreviation
B. Enter new principal office address, if applicable:	1255 Pine Street	201
(Principal office address MUST BE A STREET ADDRESS)	ALTAMONTE SPRINGS FL 32701	
		3.3.
		- 10 - P
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		25 2
		<u> </u>
		71
D. If amending the registered agent and/or registered office ad	duran in Florida, autou the name of the	
new registered agent and/or the new registered office addre		
Name of New Registered Agent		
Nume of New Negmered Agent		·
(Florida)	street address)	•
New Registered Office Address:	, Florida	(Zip Code)
	V- 27	,- <u>,</u> , , , , , ,
New Registered Agent's Signature, if changing Registered Agen		
I hereby accept the appointment as registered agent. I am familia	r with and accept the obligations of the pos	ition.
Signature of New	Registered 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.

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	Name	<u>Addres</u> s
1) Change	D	Kedrick Cuyler	1255 Pine Street
x Add			ALTAMONTE SPRINGS
Remove			FL 32701
2) Change	D	Kedrick Chuyler	7610 Westwood Dr
Add			Fort Lauderdale, FL 33321
X Remove			
3) Change	 -		
Add			
Remove			
4) Change	*		
Add			
Remove			
5) Change			
Add			
Remove			
0 0			
6) Change	****		
Add			** ** * * * * * * * * * * * * * * * *
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)			
Please amend the name and Florida street address of the registered agent to:			
Corporation Service Company			
1201 Hays Street Tallahassee FL 32301			
Please amend the name and address of the incorporator to:			
Kedrick Cuyler			
1255 Pine Street ALTAMONTE SPRINGS FL 32701			
F. 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)			

The date of each amendment(s) as date this document was signed.	doption:	, if other than the
·		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 30 days after amenament file date)	
Note: If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing requirements, this dapartment of State's records.	te will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment() fficient for approval.	s)
	proved by the shareholders through voting groups. The following statemed each voting group entitled to vote separately on the amendment(s):	e nt
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	er
X The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
Dated	19/15	
selecte	irector, president or other officer – if directors or officers have not been d, by an incorporator—if in the hands of a receiver, trustee, or other couted fiduciary by that fiduciary)	
-	Kedrick Cuyler	
	(Typed or printed name of person signing)	
	Director	
	(Title of person signing)	