## P 1500081359

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C. GOLDEN MAR 1 9 2018

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

DelBrocco, Inc.			
NAME OF CORPORATION:P15000081359 DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are	submitted for filing.		
Please return all correspondence concerning this m	natter to the following:		
Patrick DelBrocco			
	Name of Contact Person		
DelBrocco, Inc. dba, Speed	lPro Imaging		
	Firm/ Company		
4820 Cheval Blvd.			
	Address		
Lutz, FL, 33558			
	City/ State and Zip Code		
pdelbrocco@speedpro.com			
E-mail address: (to be	used for future annual report notification)		
For further information concerning this matter, ple			
For further information concerning this matter, pre	ase can.		
Patrick DelBrocco	813 753-9304 at ( )		
Name of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount mad	e payable to the Florida Department of State:		
■ \$35 Filing Fee   □\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 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	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

## Articles of Amendment to Articles of Incorporation of

FILED 2018 MAR 15 PM 4: 37

to

DelBrocco, Inc.				
P1000081359	on as currently	filed with the Florida De	pt. of State)	1 to 1
(Docume	ent Number of (	Corporation (if known)		· · ·
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this FI	orida Profit Corporation	adopts the following	; amendment(
A. If amending name, enter the new name of the con	rporation:			
				The new
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp, word "chartered," "professional association," or the a	" "Inc," or "Ce	o". A professional corpo		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDI				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u>K</u> )			
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		s in Florida, enter the na	ame of the	
Name of New Registered Agent				
	(Florida stree	t address)		
New Registered Office Address:			, Florida	
new negative a office had one	(C	lity)	Zip C	ode)
New Registered Agent's Signature, if changing Regil hereby accept the appointment as registered agent.		th and accept the obligation	ons of the position.	
Signa	ature of New Res	pistered Agent if changing	9	

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 Do	<u>oe</u>		
X Remove	<u>V</u>	Mike Jo	nes		
X Add	<u>sv</u>	Sally Sn	nith_		
Type of Action (Check One)	<u>Title</u>		Name		<u>Addres</u> s
1) Change		_		-	t.r.
Add					# · · · · · · · · · · · · · · · · · · ·
Remove					
2) Change				_	
Add					
Remove				,	
3 ) Change					
Add					
Remove				,	
4) Change		·		_	
Add					
Remove					
5) Change					
Add		<del></del> -			
Remove					
6) Change		_			
Add					
Remove					

(Attach	nding or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)
ırrently,	our Corporation, DelBrocco Inc., is authorized to sell up to 500,000 shares of stock. We are requesting
thorizat	ion to sell up to 525,000 shares of stock.
	<del></del>
<u> </u>	
<u>provis</u> (i)	mendment provides for an exchange, reclassification, or cancellation of issued shares, sions for implementing the amendment if not contained in the amendment itself: f not applicable, indicate N/A)
N/A	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date wil document's effective date on the Department of State's records.	I not be listed as the
Adoption of Amendment(s) ( <u>CHECK ONE</u> )	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	•
by"  (voting group)	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated3/13/2018	
Dated 3/13/2018 Signature Patrick Del Brown Pocsi dent	
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Patrick Del Brown (Typed or printed name of person signing) President	
(Typed or printed name of person signing)	
Tresident	
(Title of person signing)	_