P15000086004

Office Use Only



900285280259

05/02/16--01038--007 **35.00



Amend

MAY - 5 2016 I ALBRITTON

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: ___ DAD 3531 INC. DOCUMENT NUMBER: P15000086004 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **ILEANA NOA** Name of Contact Person CONCORDE LAND TITLE SERVICES, INC. Firm/ Company 134 S. DIXIE HIGHWAY, SUITE #110 Address HALLANDALE BEACH, FL 33009 City/ State and Zip Code INOA@CONCORDELTS.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **ILEANA NOA** Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & \$35 Filing Fee □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Street Address Mailing Address** Amendment Section Amendment Section Division of Corporations **Division of Corporations** P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

DAD 3531 INC.				
(Name o	of Corporation as currently file	d with the Florida Dept	t. of State)	
P15000086004				
	(Document Number of Cor	poration (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this Flori	da Profit Corporation ad	dopts the following ame	ndment(s) to
A. If amending name, enter the new na	me of the corporation:			
			The	new
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co".	A professional corpore		
B. Enter new principal office address, (Principal office address <u>MUST BE A S</u>				
C. Enter new mailing address, if applia (Mailing address MAY BE A POST) D. If amending the registered agent and		in Florida, enter the nav	ne of the	
new registered agent and/or the new		n Fiorida, enter the han	ne of the	
Name of New Registered Agent	CONCORDE LAND TITLE S	ERVICES, INC.	63 40	F. 0
	134 S. DIXIE HIGHWAY, SU	ITE #110	70 m	9
	(Florida street ac	ddress)		
New Registered Office Address:	HALLANDALE BEACH		, Florida 33009	
	(City))	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent: ered agent. I am Jamilian with a	and accept the obligation	ns of the position.	
	Signature of New Regist	tered 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)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	ISAAC HASSAN MORELY	18851 NE 29TH AVENUE
Add			#104A
X Remove			AVENTURA, FL 33180
2) Change	MGR	DAVID HASSAN MORELY	18851 NE 29TH AVENUE
Add			#104A
X Remove			AVENTURA, FL 33180
3) Change	P	DEBORAH BENAIM	18851 NE 29TH AVENUE
X Add			#104A
Remove			AVENTURA, FL 33180
4) Change	VP	DAVID HASSAN	18851 NE 29TH AVENUE
X Add			#104A
Remove		,	AVENTURA, FL 33180
5) Change			
Add			
Remove			···
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach <i>additional sheets, if necessary)</i> .	(Be specific)
.	
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(у погаррисионе, такине пол	

	if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not document's effective date on the Department of State's records.	be listed as th
Adoption of Amendment(s) (CHECK ONE)	
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'''	
by" (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.	
4/25/2016	
Signature 1 MM Wall	
(By adirector, 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)	
DAVID HASSAN	
(Typed or printed name of person signing)	
VICE PRESIDENT	
(Title of person signing)	