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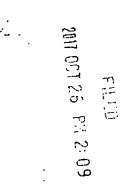
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C. GOLDEN

OCT 2 7 2017

COVER LETTER

TO: Amendment Section

Division of Corporations the Dump Service Inc. NAME OF CORPORATION: __ 815000088517 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing Please return all correspondence concerning this matter to the following Lisbet Barzaga
Name of Contact Person President 440 Florida Blud, Apt C

Address

Mianie FL 33144

City State and Zip Code Lisbelbargaga @ yahoo, es
E-mail address, (to be used for luture annual report notification) For further information concerning this matter, please call Lisbet Barzaga at (786) 3063147 Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State 🛱 \$35 Filing Fee □\$43.75 Filing Fee & □\$43-75 Filing Fee & □\$52.50 Fitting 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

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment

to

FILED

2: 09				Articles of Inc		
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			, Inc	Jump Servic	the Du	
1 134)	Dept. of State)		of Corporation as currentl	(Name of	
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ndment(s) t	əllowing a	tion adopts the fol	rida Profit Corporc	7-1006, Florida Statutes, this	suant to the provisions of section 607-10 Articles of Incorporation:	
new	T		N/A		If amending name, enter the new nan	_
atton 'n the	e must coi	orporation name	" A professional ("	mation "Corp." "Inc." or "	ne must be distinguishable and contai orp.," "Inc.," or Co.," or the designat rd "chartered." "professional association	"Cor _l
	•	·			Enter new principal office address, if incipal office address MUST BE A STI	
<u> </u>		/A	N		Enter new mailing address, if applica (Mailing address <u>MAY BE A POST Of</u>	
_		ie name of the		ew registered office address	If amending the registered agent and/ new registered agent and/or the new	
	<u> </u>	pt C	23a gq 2 Blud, A	Lishet Bo 440 Flori	Name of New Registered Agent	
<u> </u>	3314 (Zip Co	, Florida_		Wie	New Registered Office Address.	
	estion.	gations of the pos	i and accept the obt	changing Registered Agent istered agent. I am familiar	w Registered Agent's Signature, if cha ereby accept the appointment as register	<u>New</u> I here
	the abb. must con Apt (A Blod A P2 3314 A The name of the Florida =	in Florida, enter to address; and accept the obj	ntain the word "corporation onation "Corp." "Inc." or "cotton." or the abbreviation "s. if applicable: STREET ADDRESS Dicable: TOFFICE BON A LISLET BO WHO Florida structures and the structure of the struct	ne must be distinguishable and containorp.," The ." or Co.," or the designated "chartered." "professional association of the principal office address, if incipal office address MUST BE A STI incipal office address MAY BE A POST Of Mailing address MAY BE A POST Of If amending the registered agent and/or the new registered agent and/or the new Name of New Registered Agent. New Registered Office Address.	name "Corpword B. En (Prin C. E

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	PT John	1Doc	
X Remove	<u>V</u> <u>Mike</u>	e Jones	
X Add	<u>SV</u> <u>Sally</u>	. Smith	
Type of Action (Check One)	Title	<u>Name</u>	Addiess
1) Change	RA	Rafael Lopez	419 West 49 St Sorte 216, Haleah
Add		•	Sirte 216, Haleah
Remove			FL,33012
2) Change	PD	Pedro Febles	440 Ploxida Blud
∧dd			Apt C. Miam FL
Кепюус			<u> 33144</u>
3) Change	<u> </u>	Carlos Consalez	440 Plorida Blud
			Apt C, Miani, FL
Remove			33144
4)Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			
97701119			

Attach additional sheets, if necessary).	icles, enter change (Be specific)			
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an amendment provides for an excl	<u>nange, reclassificat</u>	<u>fion, or cancellation of</u>	f issued shares,	
orovisions for implementing the ame (if not applicable, indicate N/A)	endment II not con	lained in the amendm	ent use <u>n:</u>	
(if not applicant, indicate, ver)	. / .			
	NIA			
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The date of each amendment(s) adoption:	, if other than the
late this document was signed.	
Effective date <u>if applicable</u> : 10/01/17.	
ino more than D days after amendment file dates	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendmen by the shareholders was/were sufficient for approval	1(8)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following states must be separately provided for each voting group entitled to vote separately on the amendment(s):	нен
"The number of votes east for the amendment(s) was/were sufficient for approval	
by	
tvoting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholderous not required.	dei
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required	
Dated	
SignatureSlello	
(By a director, president or other officer – if directors or officers have not bee	
selected, by an incorporator - if in the hands of a receiver, trustee, or other co	urt
appointed fiduciary by that fiduciary)	
Lisbet Bargaga. (Typed or printed name of person signing)	
(Typed or printed name of person signifig)	
President	
(Title of person signing)	