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| PICK-UP WAIT MAIL | |
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17 JUL -6 AM 9-41

SECRETANY/OF STATE SECRETANY/OF STATE STATES OF CORPORATIONS

C C DERY OF STATE LLAMASSEE, FLORIDA

C. GOLDEN

JUL - 6 2017

JUL -6 AN 9

COVER LETTER

TO: Amendment Section
Division of Corporations

| NAME OF CORPORA | TION: DDKCB | INC | |
|---------------------------|---|--|--|
| DOCUMENT NUMBE | CR: P160000 | 59850 | |
| The enclosed Articles of | Amendment and fee are sub | omitted for filing. | |
| Please return all corresp | ondence concerning this mat | ter to the following: | |
| $\bar{\jmath}$ | Dionicio AM | 40~76 | |
| | ` | Name of Contact Person | |
| · · · | | | · · · · · · · · · · · · · · · · · · · |
| · | | Firm/ Company | • |
| | 4/26 m . 10/0 3 | rangan) M t/u | & KISCIANO |
| · · · · · | 7636 W 11910 Q | Address | 7 K133774 VE |
| | F(347 | 46 | 7 KISSIMME |
| - | | City/ State and Zip Code | |
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| CA | E-mail address: (to be us | 29 mail. com | |
| • | E-mail address: (to be us | ed for future annual report | notification) |
| | , . | | |
| For further information | concerning this matter, pleas | e call: | |
| | | | • |
| Dionicio | > Almonte | at (407 | 731-7130 de & Daytime Telephone Number |
| Name of | f Contact Person | Area Co | de & Daytime Telephone Number |
| | | | |
| Enclosed is a check for | the following amount made | payable to the Florida Depa | artment of State: |
| \$35 Filing Fee | □\$43.75 Filing Fee & Certificate of Status | ☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) | ☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed) |
| Mail | ing Address | Street | Address |
| | ndment Section | | Iment Section |
| Divis | ion of Corporations | | on of Corporations |
| | Box 6327 | | Building |
| Talla | ihassee, FL 32314 | | Executive Center Circle |
| | • | Tallah | assee, FL 32301 |

Articles of Amendment to Articles of Incorporation of

SECRETARY YOF STATE DIVISION OF CORPORATIONS

17 JUL -6 AM 9: 41

DDKCB INC

| (Name of Corporation as curren | ntly filed with the Florida Dept. of State) | |
|--|---|--|
| P16000059850 | | |
| (Document Number | of Corporation (if known) | |
| Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation: | is Florida Profit Corporation adopts the following amendment(s) | |
| A. If amending name, enter the new name of the corporation: | | |
| | | |
| name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc," or word "chartered," "professional association," or the abbreviation | "Co". A professional corporation name must contain the | |
| B. Enter new principal office address, if applicable: | 4636 W IRLO BRONSOM HWY | |
| (Principal office address <u>MUST BE A STREET ADDRESS</u>) | KISSIMMEE, FL 34747 | |
| | | |
| | | |
| C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>) | 4636 W IRLO BRONSOM HWY | |
| | KISSIMMEE, FL 34747 | |
| | | |
| D. If amending the registered agent and/or registered office ad | dress in Florida, enter the name of the | |
| new registered agent and/or the new registered office addre | | |
| Name of New Registered Agent | | |
| | | |
| (Florida : | (City) K.5'Si'MM6 K.5'Si'MM6 F(34746 (Zip Code) | |
| New Registered Office Address: 4636 win | lo Browson M Huy, Florida F (34746 | |
| | (City) (Zip Code) | |
| | | |
| New Registered Agent's Signature, if changing Registered Ager | | |
| hereby accept the appointment as registered agent. I am familian | r with and accept the obligations of the position. | |
| | | |
| | | |
| 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.

| Example: X Change | PT John D | , <u>,</u> , | |
|----------------------------|------------------------|--------------------|-----------------------------|
| X Remove | <u>V</u> <u>Mike J</u> | ones | |
| X Add | SV Sally S | <u>mith</u> | |
| Type of Action (Check One) | Title | <u>Name</u> | Address 4636 w. Rlo Browsow |
| 1) Change | <u>_</u> | Dionicio A/MONTS | 11 Huy Kiss. MME F(34746 |
| Add | | | · |
| Remove | | | <u> </u> |
| 2) Change | ٧P | DAMARIS Almonte | KISSIMMI F(34746 |
| Add | , . | | |
| Remove | • | | |
| 3) Change | | | |
| Add | | | <u> </u> |
| Remove | | | |
| 4) Change | · · | | |
| . Add | | | |
| Remove | | , | |
| 5) Change | | | <u> </u> |
| Add | • | | |
| Remove | | | |
| 6) Change | : | | <u> </u> |
| Add | | | |
| Remove | , | · | |

| f amending or adding additional Arti attach additional sheets, if necessary). | (Be specific) | |
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| f an amendment provides for an exch | ange, reclassification, or cancellation of iss | ued shares, itself: |
| (if not applicable, indicate N/A) | | |
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| | 07/03/2017 | |
|--|--|---------------------------|
| The date of each amendment date this document was signed | | , if other than the |
| <u> </u> | 07/03/2017 | |
| Effective date <u>if applicable</u> : | (no more than 90 days after amendment file date) | |
| | this block does not meet the applicable statutory filing requirements, this date ne Department of State's records. | will not be listed as the |
| Adoption of Amendment(s) | (<u>CHECK ONE</u>) | |
| The amendment(s) was/wei by the shareholders was/we | re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval. | |
| | re approved by the shareholders through voting groups. The following statement ad for each voting group entitled to vote separately on the amendment(s): | |
| | cast for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | e adopted by the board of directors without shareholder action and shareholder | |
| The amendment(s) was/wer action was not required. | e adopted by the incorporators without shareholder action and shareholder | |
| 07/03 Dated | /2017 | |
| Signature | Dianies almonte | |
| (B | y a director, president or other officer – if directors or officers have not been lected, by an incorporator – if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary) | |
| -1 | DIONICIO ALMONTE | |
| | (Typed or printed name of person signing) | |
| | PRESIDENT | |
| | (Title of person signing) | |