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JUL 14 2017 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	DDKCB, INC		
DOCUMENT NUMBER: P160			-1,1,210
The enclosed Articles of Amenda		bmitted for filing.	
Please return all correspondence	concerning this ma	tter to the following:	
DIONICIO) ALMONTE		
		Name of Contact Person	า
DDKCB,	INC		
		Firm/ Company	
4636 W II	RLO BRONSON F	IWY	
		Address	
KISSIMM	IEE FLORIDA 347	747	
	•	City/ State and Zip Cod	e e
ASOFL@CFL.F	RR.COM		
-		sed for future annual report	notification)
For further information concerning	g this matter, pleas	se call:	
DIONICIO ALMONTE		,407	731-7310
Name of Contact	Person	at (Area Co) 731-7310 de & Daytime Telephone Number
Enclosed is a check for the follow	ring amount made	payable to the Florida Depa	urtment of State:
	.75 Filing Fee & tificate 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)
Mailing Addre Amendment Se Division of Co P.O. Box 6327 Tallahassee, FI	ction porations	Ameno Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

DDKCB, INC (Name of Corporation as currently filed with the Florida Dept. of State) P16000059850 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: _, Florida_ New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar 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	<u>PT</u>	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) X Change	P	DIONICIO ALMONTE	3320 STEPLECHASE LN
Add			KISSIMMEE FLORIDA 34746
Remove			
2) \(\) Change	VP	DAMARIS ALMONTE	3320 STEPLECHASE LN
Add			KISSIMMEE FLORIDA 34746
. Remove			
3) <u>· C</u> hange		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			_
Add			
Remove			

If amending or adding additional Arti Attaoh additional sheets, if necessary).	(Be specific)
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·	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
.	

	JULY 7, 2017	
The date of each amendment(s) ad date this document was signed.	loption:	if other than t
JUL	Y 7, 2017	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file do	не)
	,	,
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory filing requirem partment of State's records.	ents, this date will not be listed as t
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes east for the afficient for approval.	nmendment(s)
	roved by the shareholders through voting groups. The follow each voting group entitled to vote separately on the amenda.	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action an	d shareholder
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and sha	areholder
JULY 7, 20	917	
Dated		
Signature	Minja Omale	
· (By a d	sector, president or other officer – if directors or officers ha	
	d, by an incorporator – if in the hands of a receiver, trustee, of the fiduciary by that fiduciary)	or other court
ирропп		
	DIONICIO ALMONTE	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	