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(Do	cument Number)	-
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R. WHITE

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Rockin' Ranch, Inc.		
DOCUMENT NUMBER: P16000071643		
The enclosed Articles of Amendment and fee are suit	bmitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
David Long		
	Name of Contact Persor	1
	Firm/ Company	
PO Box 1506		
	Address	
Ormond Beach, FL 32175		
	City/ State and Zip Code	;
Zig12@hotmail.com		
E-mail address: (to be us	ed for future annual report	notification)
For further information concerning this matter, pleas	e call:	
David Long	at (de & Daytime Telephone Number
Name of Contact Person	Area Coo	de & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Depa	rtment of State:
\$35 Filing Fee \$\times \text{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)
Mailing Address	Street .	<u>Address</u>
Amendment Section	Amendment Section	
Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building		
P.O. Box 6327 Tallahassee, FL 32314		Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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Rockin' Ranch, Inc.	SECMETATING ON STATE
(Name of Corpor	ation as currently filed with the Florida Dept; of State
P16000071643	
(Doc	cument Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florits Articles of Incorporation:	rida Statutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the	e corporation:
DDS Financial, Inc.	The new
	word "corporation," "company," or "incorporated" or the abbreviation orp," "Inc," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applica	
(Principal office address <u>MUST BE A STREET A</u>	DDRESS)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>BOX</u>)
D. If amending the registered agent and/or registered new registered agent and/or the new register	stered office address in Florida, enter the name of the red office address:
Name of New Registered Agent	
	(Florida street address)
V D	
New Registered Office Address:	, Florida (City) (Zip Code)
New Registered Agent's Signature, if changing F	
I hereby accept the appointment as registered agen	nt. I am familiar with and accept the obligations of the position.
•	
	ignature 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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1)Change				
Add				
Remove				
2) Change		_		
Add				
Remove				
3)Change		_		
Add				
Remove				
4)Change		<u> </u>		
Add				
Remove				
5) Change		_		
Add				
Remove				
6)Change		_		
Add				
Remove				

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
	
	
f an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:
(if not applicable, indicate N/A)	

	April 19, 2018	
The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this date v Department of State's records.	vill not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were a action was not required.	adopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	adopted by the incorporators without shareholder action and shareholder	
April 19	, 2018	
Dated	2	
6:		
Signature <u>(</u> ز (By)	director, president or other officer – if directors or officers have not been	
	sted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
арро		
	David Long	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	