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Division of Corporations

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From:

Account Name : DOCUMENT PLANET INC

Account Number : I20180000095 Phone : (305)510-3848

Fax Number : (786)789-2416

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COVER LETTER

TO: Amendment Section Division of Corporati	ons			
NAME OF CORPORAT	ION:	cument F	Planetinc	
DOCUMENT NUMBER	: P16	0000 8208	<u>/</u>	
The enclosed Articles of A	mendment and fee are sul	omitted for filing.		
Please return all correspon	dence concerning this mat	ter to the following:		
	Onex	RIRA P. M		
	Name of Contact Person DOCUMENT Planet -			
	P.0	Firm/ Company - BOX 1334	96	
	H	BOX 1334 Address aleah PC	33007	
		City/ State and Zip Code	-	
	INFO @	DOCUMENTA	anefine.com	
	E-mail address: (to be us	ed for future annual report	notification)	
For further information co	ncerning this matter, pleas	e call:		
SherriRA	- P. Montali	van 305	510·3848·	
***************************************	ontact Person		ie & Daytime Telephone Number	
Enclosed is a check for the	following amount made p	onyable to the Florida Depar	rtment of State:	
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address			Address	
	nent Section		ment Section	
	of Corporations		n of Corporations	
P.O. Bo	x 6327 isee, FL 32314		Building xecutive Center Circle	
1 01141101	1000, IL JAJI7	200112	NOUSETTO COMMENT CITATO	



Tallahassec, FL 32301

H190002604423

Articles of fired	rporation		
DOCUMA	nt Planefinc		
	filed with the Florida Dept. of State)		
^	00 8208 1		
		 -	
(Document Number of	Corporation (il known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this F its Articles of Incorporation:	lorida Profit Corporation adopts the following	ing amen	dment(s)
A. If amending name, enter the new name of the corporation;			
		The	new
name must be distinguishable and contain the word "corporation."	" "company," or "incorporated" or the	a bbrevia	rtio n
"Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc." or "Coword "chartered," "professional association," or the abbreviation "P.	0°. A professional corporation name musi A "	t contain	the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			
(11 morphi office mantes most be A STREET ADDRESS)			
			·
C. Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
		· _ • _	
D. If amounting the resistant areas and the second areas		9	
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the	AUG	773
		2	- 1
Name of New Registered Agent	<u></u> <u>5≺</u>	_ &	
	<u>. 'c</u>	7800 1380	m
(Florida street	address)		Ö
New Registered Office Address:	· · · · · · · · · · · · · · · · · · ·		
	ity) Florida (Zio	Code)	-
,-	124		
New Registered Agent's Signature, if changing Registered Agent:			
hereby accept the appointment as registered agent. I am familiar wit	h and accept the obligations of the position.		
		→	
Signature of New Reg	istered Agent, if changing		

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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:	C, 6010 541	it annual or as are read.	
X Change	PI	<u>John Doe</u>	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>\$Y</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
l)Change	VP	Georgina Rocha	4167 NW 135 st Da locka PL 33052
Add Remove		J	Valocka Fr 33052
2) Change		-	
Add			
Remove			
3) Change			19 SEC
Add			AUG T
Remove			28 L
4) Change Add			0. 100000000000000000000000000000000000
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

H190002604423 E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares. provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)

1-210 H9	000%	260	141
The date of each amendment(s) adoption: 08 27 20 9. date this document was signed.	, if	other t	hen the
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 document's effective date on the Department of State's records.	will not b	e listed	as the
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" (voting group)	,		
(voting group)		19	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	CRETARY OF STATE LAHASSEE, FLORIE	AUG 28	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	TOF SI	AH 9:	CB
Dated 8/28/19	ATE SRIDA	;; •••	
Signature			
(By a director, 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)			
Overrier P. Montaluan	j 		
(Typed or printed name of person signing)			
President.			
(Title of person signing)			