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COVER LETTER

TO: Amendment Section Division of Corporations

3 4

DC CONSULTING GROUP, INC. NAME OF CORPORATION:					
DOCUMENT NUMBER: P16000083046					
The enclosed Articles of Amendment and fee are su	ubmitted for filing.				
Please return all correspondence concerning this ma	atter to the following:				
DANIEL A CIFUENTES					
DC CONSULTING GROUP	Name of Contact Person P. INC.				
Firm/ Company 801 BRICKELL KEY BLVD, #1708					
Address MIAMI, FL 33131					
	City/ State and Zip Code				
DCIFUENTES2511@GMAIL.CO	M /				
E-mail address: (to be us	sed for future annual report notification)				
For further information concerning this matter, pleas	se call:				
DANIEL A CIFUENTES	305 812-7002 at ()				
Name of Contact Person	at () 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 & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$62.50 Filing Fee Certified Copy (Additional Copy is enclosed)				
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle				

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

DC CONSULTING	GROUP, INC.

(<u>Name</u>	of Corporation as curre	ntly filed with the Florida Dept, of State)
P16000083046			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, th	is Florida Profit Corporation adopts the I	'ollowing amendment(s) to
A. If amending name, enter the new n	ame of the corporation:		
N/A			The new
	nation "Corp." "Inc." or	tion," "company," or "incorporated" o "Co". A professional corporation nam n "P.A."	r the abbreviation
		801 BRICKELL KEY BLVD	
B. Enter new principal office address, (Principal office address MUST BE A S		#1708	
		MIAMI, FL 33131	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		801 BRICKELL KEY BLVD	FI SEP 2
		#1708	20 EED
		MIAMI, FL 33131	-
D. If amending the registered agent an new registered agent and/or the new			3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3
Name of New Registered Agent	801 BRICKELL KEY B	11 VI > #1708	
New Registered Office Address:	MIAMI	street address) . Florida	33131
		(City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		nt: r with and accept the obligations of the po	esition.
	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	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
X 1) Change	P	DANIEL A CIFUENTES	801 BRICKELL KEY BLVD
Add			#1708
Remove			MIAMI, FL 33131
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		-	
Add			
Remove			
5) Change	<u></u>	-	
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>If amen</u>	ding or adding additional Art	icles, enter change(s)	<u>here</u> :		
	additional sheets, if necessary).	(Be specific)			
N/A					
					
					<u> </u>
-					
			_		_
				 	
	<u> </u>				
		_			
	•			•	· -
F. If an am	nendment provides for an exc	nange, reclassification	, or cancellation of i	ssued shares,	
provisi	ons for implementing the ame	ndment if not contain	ed in the amendmer	ıt itself:	
(if: N/A	not applicable, indicate N/A)				
IN/A					
	••				
			-		 -

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
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 document's effective date on the Department of State's records.	late 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 cast for the amendment by the shareholders was/were sufficient for approval.	i(s)
☐ 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):	neni
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
 □ The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required. ■ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder 	der
action was not required.	
Dated 09 17 18	
Signature	
(By a director, president or other officer – if directors or officers have not beer selected, by an incorporator – if in the hands of a receiver, trustee, or other corappointed fiduciary by that fiduciary)	
DANIEL A CIFUENTES	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	