P16000089343

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name	e)
(Do	ocument Number)	
Certified Copies	Certificates o	of Status
Special Instructions to	Filing Officer:	
L	Office Use Only	,



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: <u>DJA Mo</u>	BILE SERVI	CES, INC.
DOCUMENT NUMBER: <u>P16000</u>		
The enclosed Articles of Amendment and fee are sul	bmitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
JUAN RODA	Name of Contact Persor	1
	Firm/ Company	
14510 SW		
MIAMI, FL.	33196 City/ State and Zip Code	e
E-mail address: (to be us For further information concerning this matter, pleas	ed for future annual report	notification)
DANYER L. RODRIG Name of Contact Person		927-5074
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Depa	irtment of State:
\$35 Filing Fee	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amenc Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment ŧo Articles of Incorporation of

Are Are	en oct			
DJA MOBILE SERVI (Name of Corporation	CES, INC.	6		
(Name of Corporation	as currently filed with the Florida D	ept. of State)		
P16000	089343	6_		
(Documen	it Number of Corporation (if known)	ల్ల		
Pursuant to the provisions of section 607,1006, Florida Stits Articles of Incorporation:	tatutes, this Florida Profit Corporation	a adopts the following amendment(s) to		
A. If amending name, enter the new name of the corp	oration:			

name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered," "professional association," or the ab	"Inc," or "Co". A professional corp breviation "P.A."	poration name must contain the		
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	19800 SN LOT 71	180 TH AV.		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	MI MMI, F 19800 SV LOT 71 MIAMI, F	V 180TH JV.		
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		name of the		
Name of New Registered Agent				
	(Florida street address)			
New Registered Office Address:	(City)	, Florida(Zip Code)		
New Registered Agent's Signature, if changing Regist I hereby accept the appointment as registered agent. I a		tions of the position.		
Signati	ure of New Registered Agent, if changi	ng		

If amending the Officer address of each Officer (Attach additional sheets,	and/or 1	Director being		nd name of ca	ch officer/di	rector	being removed and title, name, a	ınd
Please note the officer/dv P = President; V= Vice Executive Officer; CFO held, President, Treasure Changes should be noted	rector till Presiden = Chief (r. Direct l in the fo	le by the first b i; T= Treasure Financial Offic or would be P ollowing manne orporation, Sc	er; S= Secreta ver. If an offi TD. er. Currently tlly Smith is n	iry; D= Direct cer/director hi John Doe is lis	ilds more that ted as the PS	in one i ST and i	= Chairman or Clerk; CEO = Cl title, list the first letter of each of Mike Jones is listed as the V. Ther noted as John Doe, PT as a Chan	lice e is
Example: - <u>X-</u> Change	<u>PT</u>	John Doe						
X Remove	<u>V</u>	Mike Jones				l I		
X Add	<u>sv</u>	Sally Smith						
Type of Action (Check One)	Title	<u>Na</u>	<u>ne</u>			Addre	<u>s</u> s	
1) Change	P_		TYAN	RODRI	GUE'Z	19	800 SW 180™ av. 1 ami, FL 33187	Lorial
Add						Mi	AMI, FL 33187	
Remove								
2) Change	_p		ANYEI	R RODI		· 1	800 SW 180TH Ave	
<u></u> ✓ Add						_ L &	71	
Remove						M	AMI, FL 33187	
3) Change								
Add								
Remove								
4) Change								
Add							 	
Remove								
5) Change								
Add								
Remove								
6) Change								
Add								
Remove								

amending or adding additional Articles, enter change(s) here:	
ttach additional sheets, if necessary). (Be specific)	
	1
an amendment provides for an exchange, reclassification, or cancellation of provisions for implementing the amendment if not contained in the amendme	issued shares,
(if not applicable, indicate N/A)	, and token.
	

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 day	le)
Note: If the date inserted in this block does not meet the applicable statutory filing requireme document's effective date on the Department of State's records.	nts, this date 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 east for the are by the shareholders was/were sufficient for approval.	mendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amendment.	
"The number of votes east 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 action was not required.	l shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	reholder
Dated SEP. 22 2017	
Signature	
(By director, president or other officer – it directors or officers have selected, by an incorporator – if in the hands of a receiver, trustee, of	
appointed fiduciary by that fiduciary)	Total court
TUAN RODRIGUEZ (Typed or printed name of person signing)	
	1
JUAN RODRIGUEZ PRESTSE (Title of person signing)	ENT
(Title of person signing)	