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TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: DOBARGANES?	MIAMI, INC.			
DOCUMENT NUM	D17000008530	_			
The enclosed Article	rs of Amendment and fee are st	abmitted for filing.			
Please return all corr	respondence concerning this ma	tter to the following:			
	YUDIT GODOY				
		Name of Contact Perso	n		
	DOBARGANES MIAMI, INC.				
		Firm/ Company			
	6799 W FLAGLER ST				
		Address			
	MIAMI, FL 33144				
		City- State and Zip Cod	<u> </u>		
A.		,			
ON —	ESTOPSERVICES@USA.COM				
	E-mail address: (to be u	sed for future annual report	notification)		
For further informati	on concerning this matter, pleas	se call:			
YUDIT GODOY		305	762-0467		
Name of Contact Person		at (305) 762-0467 Area Code & Daytime Telephone Number			
Enclosed is a check	for the following amount made	payable to the Florida Depo	artment of State:		
S35 Filing Fee	□\$43.75 Filing Fee & 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassec, Ft. 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation οf

DOBARGANES MIAMI, INC.	
(Name of Corporation as o	currently filed with the Florida Dept. of State)
P17000008530	
(Document No	umber of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statuits Articles of Incorporation:	tes, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corpora	tion:
	The new
name must be distinguishable and contain the word "con "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc word "chartered," "professional association," or the abbrev	rporation," "company," or "incorporated" or the abbreviation c," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>	()
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered off new registered agent and/or the new registered office	
Name of New Registered Agent	
ιFi	lorida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am for	1 Agent: uniliar with and accept the obligations of the position
The second of th	польно польный иссерственный признать.
_	
Corneture	of Nove Routetored Agant of 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 Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: <u>X</u> Change	PT	John Doe			
X Remove	<u>V</u>	Mike Jones			
X Add	\underline{SV}	Sally Smith			
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s		
1) Change	V	YANELA ILLARRETA	4421 SW 161 ST PATH		
XAdd			MIAMI, FL 33185		
Remove					
2) Change					
Add					
Remove					
3.) Change					
Add					
Remove					
4)Change					
Add					
Remove					
51 Change					
Add					
Remove					
6) Change					
Add					
Remove					

<u>ii amending</u> Aitach <i>addit</i>	or adding additional Article onal sheets, if necessary) — (s, enter change(s) f Be specifics	<u>iere</u> :		
					
					
					<u>-</u>
		<u>-</u>			
provisions:	ment provides for an exchan or implementing the amendi pplicable, indicate N/A)	ge, reclassification, ment if not contain	or cancellation of i	issued shares, nt itself:	
		·			
				· · · · · · · · · · · · · · · · · · ·	

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.	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 amendmen by the shareholders was/were sufficient for approval.	t(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):	nent
"The number of votes cast for the amendment(s) was were sufficient for approval	
by	
by	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	der
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
06/12/2017 Dated	
(By a director, president or other officer – if directors or officers have not bee selected, by an incorporator – if in the hands of a receiver, trustee, or other co-appointed fiduciary by that fiduciary)	urt
YUDIT GODOY	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	