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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	RATION: DOBARGANES N	HAMI INC	
DOCUMENT NUMI	BER: P17000008530		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	YANELA ILLARRETA		
		Name of Contact Person	1
	DOBARGANES MIAMLIN	C	
		Firm/ Company	
	6799 W FLAGLER ST		
		Address	
	MIAMI, FL 33144		
		City/ State and Zip Cod	e
ONE	STOPSERVICES@USA.COM	v <b>i</b>	_
	E-mail address: (to be us	sed for future annual report	
For further informatio	n concerning this matter, pleas $\Gamma A$	se call:at (	753-0138
Name	of Contact Person		de & Daytime Telephone Number
	r the following amount made		•
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)
And Divi P.O	ling Address endment Section sion of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton 2661 E	Address Innent Section on of Corporations Building Executive Center Circle assee, FL 32301

## Articles of Amendment to Articles of Incorporation of

DOBARGANES	MIAMI INC

		_			
( <u>Name o</u>	of Corporation as current	ly filed with the Florida Dept.	of State)		
P17000008530					
	(Document Number (	of Corporation (if known)			
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation ado	pts the following	amendr	neni(s)
A. If amending name, enter the new na	me of the corporation:				
name must be distinguishable and cont "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa.	ation "Corp." "Inc." or	"Co". A professional corporati	ated" or the abi		on
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )		YANELA ILLARRETA			
		6799 W FLAGLER ST			-
		MIAMI, FL 33144	) i	17	_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			1-2 22 25 25 25 25 27	JUL 17 PH	FILED
D. If amending the registered agent an new registered agent and/or the new	v registered office addres		of the	3: 47	-
Name of New Registered Agent	YANELA ILLARRETA				
	6799 W FLAGLER ST				
	(Florida st	reet address)			
<u>New Registered Office Address:</u>	MIAMI	, 1	Florida 33144		
		(City)	(Zip Ce	ide)	-
New Registered Agent's Signature, if cl I hereby accept the appointment as regist			at the consisten		
r nevery accept the appointment as regist		With and accept the obligations of the configurations of the control of the control of the changing of the cha	oj ine position.		

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: XChange	<u>PT</u>	John Doe	
$\underline{X}$ Remove	$\underline{V}$	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PT	YUDIT GODOY	6799 W FLAGLER ST
Add			MIAMI, FL 33144
X Remove			
2) Change	PT	YANELA ILLARRETA	6799 W FLAGLER ST
X Add			MIAMI, FL 33144
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

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

	07/14/2017	
The date of each amendment(s) a date this document was signed.	doption:, if other th	an the
	4/2017	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the Do	block does not meet the applicable statutory filing requirements, this date will not be listed epartment of State's records.	as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were adby the shareholders was/were so	opted by the shareholders. The number of votes east for the amendment(s) afficient for approval.	
	proved by the shareholders through voting groups. The following statement 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)	
☐ The amendment(s) was/were adaction was not required.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adaction was not required.	opted by the incorporators without shareholder action and shareholder	
07/14/201		
Dated	·	
Signature		
(By a C selecti	lirector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court	
	ited fiduciary by that fiduciary)	
	YANELA ILLARRETA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	