## P170000 37659

(Req	uestor's Name)	
bbA)	ress)	<u> </u>
(Add	iess)	
(City	/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bus	iness Entity Nar	me)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



900352374879

09/29/20+-01005+-007 \*\*35.00

NOVY

707 SEP 29 AM 6: 22

## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CO	ORPORAT	TON: D' JHOMARI, INC	<u>.</u>	
		:: P17000037659		
		Imendment and fee are sul	bmitted for filing.	
Please return a	ll correspor	idence concerning this ma	tter to the following:	
	CE	SAR M ALBERTO POSA	ADA	
	-		Name of Contact Perso	on
	D'.	HOMARI, INC.		
			Firm/ Company	
	36	55-3665 N. Dixie Highwa	ıy	
			Address	
	Oal	cland Park FL 33334		
			City/ State and Zip Coo	le
For further info		ncerning this matter, pleas		654 9315
		ontact Person	at (are) Co	ode & Daytime Telephone Number
	heck for the	e following amount made	payable to the Florida Dep	partment of State:
S35 Filing	, rec	(2)\$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)
	Amendi		Amen Divisi The C	Address dinent Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

## Articles of Amendment to Articles of Incorporation of

D' JHOMARI, INC.			
(Name o	f Corporation as currently	filed with the Florida Dept. of State)	
P17000037659			
	(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporation adopts the following	(amendment(s) to
A. If amending name, enter the new na	me of the corporation:		
			The new
	"orp," "Inc," or "Co". A	mpany," or "incorporated" or the abbreviation professional corporation name must contain	n "Corp"
B. Enter new principal office address, (Principal office address MUST BE A ST			2020 SEP
			EP 29
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			<u> </u>
			22
D. If amending the registered agent an new registered agent and/or the new		ss in Florida, enter the name of the	
Name of New Registered Agent	ALDO ALBERTO		
	(Florida stree	address)	
New Registered Office Address:	2820 NE 49th Street Fort La	uderdale <u>y</u> . Florida 33308	
	((	Σιγ) (Zip C	ode)
New Registered Agent's Signature, if cl I hereby accept the appointment as registe	ered agent. I am familiar wi	th and accept the obligations of the position.	

Check if applicable

 $\square$  The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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.

X Change	<u>PT</u>	<u> John Doe</u>		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s	
1) Change	p	CESAR M ALBERTO POSADA	4683 Blazer Terrace	
X Add			Davie FL 33314	
Remove				
2) X Change	VP	PEDRO GOMEZ	12701 SW 14TH STREET	
Add			PEMBROKE PINES, FL 33027	
Remove	т	Aldo Alberto Posada	2820 NE 49th Street Fort Lauderdale FL 33308	
3 ) Change Add		<del></del>	FOR Laudergale PL 55508	
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

ttach additiona	dding additional Articles, enter change(s) here: sheets, if necessary). (Be specific)	
<del></del>		
	<u> </u>	
		<del></del> -
<u> </u>		
		·
	· · · · · · · · · · · · · · · · · · ·	
<u>an amendmen</u>	provides for an exchange, reclassification, or cancellation of issued shares,	
<u>rovisions for i</u>	inplementing the amendment if not contained in the amendment itself:	
(i) not appu	able, indicate N/A)	

•

The date of each amendment(s) adopt date this document was signed.	otion:, if other than the
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this bloc document's effective date on the Depart	k does not meet the applicable statutory filing requirements, this date will not be listed as the timent of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
I.1 The amendment(s) was/were adopte action was not required.	ed by the incorporators, or board of directors without shareholder action and shareholder
The amendment(s) was/were adopted by the shareholders was/were suffice.	ed by the shareholders. The number of votes east for the amendment(s) cient for approval.
must be separately provided for each	ved by the shareholders through voting groups. The following statement why voting group entitled to vote separately on the amendment(s):  the amendment(s) was/were sufficient for approval
Both Members	the amendment(s) was/were surretent for approval
оу	tvoting group)
selected, b	tor, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court
	fiduciary by that fiduciary)
CF	ESAR M ALBERTO POSADA
	(Typed or printed name of person signing)
Pro	esident
	(Title of person signing)

as the

•