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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

**Division of Corporations** 

P.O. Box 6327 Tallahassee, FL 32314

AME OF CORPORATION: DIVO FILE AVAIRS INC.					
DOCUMENT NUMBER: P17000046708					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Name of Contact Person  Silver Firm Company  Hot Commerce Way 2A  Address  Suppler, FL 33458  City/ State and Zip Code  Candage O. dilo Fre alarus. Com  E-mail address: (to be used for future annual report notification)	- - -				
For further information concerning this matter, please call:					
Millie Proman at (511) 748-7255					
Name of Contact Person Area Code & Daytime Telephone Number	e <b>r</b>				
nclosed is a check for the following amount made payable to the Florida Department of State:					
S35 Filing Fee Certificate of Status (Additional copy is enclosed)  Certificate of Status Certified Copy (Additional Copy is enclosed)					
Mailing Address Amendment Section  Street Address Amendment Section					

Division of Corporations Clifton Building 2661 Executive Center Circle

Tallahassee, FL 32301

## , Articles of Amendment to Articles of Incorporation of

FILED 17 OCT 30 PM 1: 38

(Name of Corporation as currently filed with the Florida Dept. 145th 1455.)  Ploobout 908 (Document Number of Corporation (if known))  If summer to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following Articles of Incorporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  If amending name, enter the new name of the corporation:  "Corp.," "Inc.," or "Co.", A professional corporation name must or "Corp.," "Inc.," or "Co.", A professional corporation name must or "P.A."  Enter new principal office address, if applicable:  If amending name, enter the new name of the corporation:  "Corp.," "Inc.," or "Co.", A professional corporation name must or "Corp.," "Inc.," or "Co.", A professional corporation name must or "Corp.," "Inc.," or "Co.", A professional corporation name must or "Corp.," "Inc.," or "Co.", A professional corporation name must or "Corp.," "Inc.," or "Co.", A professional corporation name must or "Corp.," "Inc.," or "Co.", A professional corporation name must or "Corp.," "Inc.," or "Co.", A professional corporation name must or "Corp.," "Inc.," or "Co.", A professional corporation name must or "Corp.," "Inc.," or "Co.", A professional corporation name must or "Corp.," "Inc.," or "Co.", A professional corporation name must or "Corp.," "Inc.," or "Co.", A professional corporation name must or "Corp.," "Inc.," or "Co.", A professional corporation name must or "Corp.," "Inc.," or "Co.", A professional corporation name must or "C	Y GET STATE
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Enter new mailing address, if applicable:	bbreviation
If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent	
New Registered Office Address:  (Florida street address)  Florida  (City)  (Zip C	- Code),
w Registered Agent's Signature, if changing Registered Agent:	
ereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	
Alm	
Signature of New Registered Agent, if changing	

address of each Officer (Attach additional sheets Please note the officer/di P = President; V = Vice Executive Officer; CFO held. President, Treasure Changes should be noted a change, Mike Jones led Mike Jones, V as Remove	and/or D  i, if necess irector titl President = Chief I er, Directo I in the fo aves the c	Director bosary)  Ite by the fit; T= Trea  Financial  F	eing added:  rst letter of the office  ssurer; S= Secretary  Officer. If an offices  be PTD.  anner. Currently Jos  n, Sally Smith is nam	title: ; D= Director: TR= Tri r/director holds more th hn Doe is listed as the P.	lirector being removed and to ustee; C = Chairman or Clerk an one title, list the first letter ST and Mike Jones is listed as nould be noted as John Doe, P	c; CEO = Chiej r of each office the V. There is	
Example: XChange	<u>PT</u>	John Do	<u>e</u>			; ;	
X Remove	<u>v</u>	Mike Joi	<u>nes</u>				
X Add	<u>SV</u>	<u>Sally Sn</u>	<u> iith</u>				Ţ
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If amending or adding additional Artic	ties, enter change(s) here.
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	and the state of t
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, idment if not contained in the amendment itself:
(if not applicable, indicate N/A)	to the contained in the amendment toeth.
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The date of each amendment(s) adoption: 10 2517 date this document was signed.	, if other than
Effective date if applicable: 10 35 17 (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 date wi document's effective date on the Department of State's records.	ll not be listed as
Adoption of Amendment(s) (CHECK ONE)	, , 1
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 10 25 17	
Signature Candace Thilman	1
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
(Typed or printed name of person signing)	
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(Title of person signing)	<u> </u>
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