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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: Damien Blo	umetti Inc	
DOCUMENT NUMBER: P17000063341		
The enclosed Articles of Amendment and fe	e are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
Damien Blumetti		
	Name of Contact Perso	on
Damien Blumetti Inc.		
	Firm/ Company	
2131 Hillview Street		
	Address	
Sarasota Fl. 34239		
	City/ State and Zip Co	de
dblumetti@gmail.com		
-	to be used for future annual repor	t notification)
	, so o boto to rotture (minus) repor	
For further information concerning this matt	er, please cail:	
Descion Division		7002401
Damien Blumetti	at (
Name of Contact Person	Area Co	ode & Daytime Telephone Number
Enclosed is a check for the following amoun	t made payable to the Florida Dep	partment of State:
\$35 Filing Fee		□\$52.50 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	Amen Divisi Cliftor 2661 l	Address dment Section on of Corporations n Building Executive Center Circle lassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	of	
Damien Blum	netti INC.	2018 J. 123 EV 12:
(Name of Corporation	as currently filed with the Florid	la Dept. of State)
P 17000063	341	
	nt Number of Corporation (if know	n)
Pursuant to the provisions of section 607.1006, Florida Sits Articles of Incorporation:	tatutes, this Florida Profit Corpor	ation adopts the following amendment(s)
A. If amending name, enter the new name of the corp	oration:	
Damien Blumetti Architects, Inc.		The new
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	incorporated" or the abbreviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRI		et Sarasota, Fl. 34239
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	2131 Hillview Stree	et Sarasota, Fl. 34239
D. If amending the registered agent and/or registered new registered agent and/or the new registered off		the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I a	ered Agent: un familiar with and accept the obl	igations of the position.
Signatu	re of New Registered Agent, if cha	nging

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: X Change	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1)Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			· · · · · · · · · · · · · · · · · · ·
			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	dding additional Ar sheets, if necessary).	. (Be specific)	-		
					
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<u>f an amendment</u> provisions for it	provides for an exc nplementing the am	<u>:hange, reclassific</u> endment if not co	<u>ation, or cancellat</u> ntained in the am	<u>ion of issued shares</u> endment itself:	3
(if not applie	cable, indicate N/A)				
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The date of each amendment(s) a	doption;	, if other than the
date this document was signed.		
	6/2018	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirements, this date will nepartment of State's records.	ot be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast 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 east	for the amendment(s) was/were sufficient for approval	
by	."'	
, —	(voting group)	
☐ The amendment(s) was/were add action was not required.	opted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
01/16/2018 Dated		
Signature	lamien blumetti	
(By a d selecte	lirector, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court sted fiduciary by that fiduciary)	-
	Damien Blumetti	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	