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COVER LETTER

T0: Amendment Section Division of Corporations ٠,٠

Tallahassee, FL 32314

NAME OF CORPOR	ATION:	Danna Corp			
DOCUMENT NUMB	OCUMENT NUMBER:P17000077572				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
		Eric Amsallem			
-					
	Name of Contact Person Florida Invest LLC				
-	Firm/ Company				
	517 W 41st Street, #500				
-		Address			
		Miami Beach, FL 3314	()		
	City/ State and Zip Code				
		Erie@florida-invest.com	1		
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	concerning this matter, pleas	se call:			
Eric	Amsallem	.786	. 985-1374		
Name of Contact Person		at (<u>786</u> Area Co)de & Daytime Telephone Number		
Enclosed is a check for	the following amount made				
■ \$35 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		Amend Divisio	Address Iment Section on of Corporations Building		

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

	of
	Dannapro Corp
(Name of Corporation	as currently filed with the Florida Dept. of State)
	P17000077572
(Documen	it Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp.	oration:
	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the
B. <u>Enter new principal office address, if applicable:</u> (Principal office address <u>MUST BE A STREET ADDRE</u>	<u>ESS</u>)
C. <u>Enter new mailing address, if applicable:</u> (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered new registered agent and/or the new registered off	office address in Florida, enter the name of the lice address:
Name of New Registered Agent	
21/23/2-1981	(Florida street address)
New Registered Office Address.	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registo I hereby accept the appointment as registered agent. I a	ered Agent: Im familiar with and accept the obligations of the position.
Signatu	ure of New Registered Agent, if 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 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>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	Laura D'Anna	59 Traverse de la Gouffone
Add			Marseille, FR 13009
X Remove			
2) Change	P	Nicolas D'Anna	59 Traverse de la Gouffone
Add			Marseille, FR 13009
X Remove			
3) Change	<u>P</u>	Jean Pierre D'Anna	59 Traverse de la Gouffone
XAdd			Marseille, FR 13009
Remove			
4) Change	P	Christiane D'Anna	59 Traverse de la Gouffone
XAdd			Marsseille, FR 13009
Remove			
<i>5)</i> Change			
Add			
Remove			
<i>6</i>) Change			
Add			
Remove			

Attach <i>additiona</i>	adding additional Ar Il sheets, it necessary).	. (Be specific)	4410111010		
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f an amendmen	t provides for an exc	hange, reclassific	ation, or cancella	tion of issued shar	<u>.62'</u>
(if not appl.	mplementing the amicable, indicate N/A)	<u>endment if not co</u>	<u>intained in the am</u>	<u>iendment itself:</u>	
		71 1 - 4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			
		· · · · · ·			

•	october 4, 2017	
The date of each amendment(s) ad date this document was signed.		, if other than the
Effective date if applicable:		
	(no more than 90 days after amendn	nent file date)
Note: If the date inserted in this b document's effective date on the Dep	lock does not meet the applicable statutory filing partment of State's records.	requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ado by the shareholders was/were suf	pted by the shareholders. The number of votes cas ficient for approval.	st for the amendment(s)
	roved by the shareholders through voting groups. each voting group entitled to vote separately on the	
	or the amendment(s) was/were sufficient for appro	oval
by	(voting group)	,
	(voting group)	
	pted by the board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action	on and shareholder
October 4 Dated	. 2017	
Signature		
(By a di selected	rector, president or other-office - if directors or of the interporator - if in the hands of a receiver ed fiduciary by that tiduciary)	fficers have not been trustee, or other court
	(Typed or printed name of person signi	ng)
	(Title of person signing)	