

| (Req | uestor's Name) | |
|---------------------------|------------------|------|
| (Add | ress) | |
| (Add | ress) | |
| (City | /State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bus | iness Entity Nar | me) |
| (Doc | cument Number) | |
| Certified Copies | | |
| | | |
| Special Instructions to F | filing Officer: | |
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Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

| NAME OF CORPOR | RATION: GRUPO DEC INC | • | |
|--------------------------|---|--|--|
| DOCUMENT NUMB | | | |
| The enclosed Articles | of Amendment and fee are su | bmitted for filing. | |
| Please return all corres | pondence concerning this ma | tter to the following: | |
| | DIXON ESCALANTE | | |
| • | | Name of Contact Perso | n |
| | GRUPO DEG INC | | |
| | | Firm/ Company | |
| | 724 NE 85 STREET APT 30 | 2 | |
| • | ··· | Address | - |
| | MIAMI, FL 33138 | | |
| • | | City/ State and Zip Cod | le |
| MKA | RPEL@GMAIL.COM | | |
| | | sed for future annual report | notification) |
| | (| | ,, |
| For further information | concerning this matter, pleas | se call: | |
| MIGUEL KARPEL | | 305 | 332-3211 |
| Name o | of Contact Person | Area Co | ode & Daytime Telephone Number |
| Enclosed is a check for | 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) |
| Mailing Address | | | Address |
| | ndment Section | Amendment Section | |
| | Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building | | |
| | hassee, FL 32314 | | Executive Center Circle |

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

| CD | LIDE | 7 17 | EC: | INC |
|------|---------|-------|-----|-----|
| 3 17 | t 3 F t | , , , | | 111 |

| (Name of Corporatio | n as currently filed with the Florida Dept. of State) |
|---|---|
| p 17000083889 | |
| (Docume | ent Number of Corporation (if known) |
| Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation: | Statutes, this Florida Profit Corporation adopts the following amendment(s) t |
| A. If amending name, enter the new name of the con | rporation: |
| | The new |
| | "corporation," "company," or "incorporated" or the abbreviation ""Inc," or "Co". A professional corporation name must contain the abbreviation "P.A." |
| B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADD</u> | |
| | .: == |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX | |
| · · · · · · · · · · · · · · · · · · · | SSE 5 E 回 |
| D. If amending the registered agent and/or registere new registered agent and/or the new registered of | |
| Name of New Registered Agent | |
| | |
| | (Florida street address) |
| New Registered Office Address: | , Florida |
| | (City) (Zip Code) |
| | |
| New Registered Agent's Signature, if changing Regis | stered Agent: |
| I hereby accept the appointment as registered agent. I | am familiar with and accept the obligations of the position. |
| | |
| | |
| | ture 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.

| Example: X Change | <u>PT</u> | John Doe | | |
|----------------------------|-----------------|------------|-----------------|---------------------|
| X Remove | \underline{V} | Mike Jon | <u>es</u> | |
| X Add | <u>sv</u> | Sally Smi | i <u>th</u> | |
| Type of Action (Check One) | <u>Title</u> | <u>]</u> | Name . | <u>Addres</u> s |
| 1) Change | PRES | _ : | DAURY ESCALANTE | 7950 NE BAYSHORE CT |
| XAdd | | | | APT 908 |
| Remove | | | | MIAMI FL 33138 |
| 2) Change | | - - | | |
| Add | | | | |
| Remove | | | | |
| 3) Change | | - - | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | - | | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 6) Change | | | | |
| Add | | | | |
| Remove | | | | |

| If amending or adding additional Art (Attach additional sheets, if necessary). | (Be specific) |
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| provisions for implementing the amo | hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself: |
| (if not applicable, indicate N/A) | 0 TO DIXON ESCALANTE TO 40 AND 60 NEW SHARES ISSUED TO |
| | O TO DIXON ESCALANTE TO 40 AND 60 NEW SHARES ISSUED TO |
| AURY ESCALANTE | |
| ··· | |
| | |
| | |
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| | |
| | |

| The date of each amendment(s) adoption:date this document was signed. | , if other than the |
|--|---|
| Effective date if applicable: | |
| (no more than 90 days after amendm | ent file date) |
| Note: If the date inserted in this block does not meet the applicable statutory filing document's effective date on the Department of State's records. | requirements, this date will not be listed as the |
| Adoption of Amendment(s) (<u>CHECK ONE</u>) | |
| ■ The amendment(s) was/were adopted by the shareholders. The number of votes cas by the shareholders was/were sufficient for approval. | st for the amendment(s) |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups, must be separately provided for each voting group entitled to vote separately on the | |
| "The number of votes cast for the amendment(s) was/were sufficient for appro- | oval |
| by | <u></u> |
| (voting group) | |
| ☐ The amendment(s) was/were adopted by the board of directors without shareholder action was not required. | action and shareholder |
| ☐ The amendment(s) was/were adopted by the incorporators without shareholder action action was not required. | on and shareholder |
| 11/13/17 | |
| Dated | |
| Signature . | |
| (By a director, president or other officer – if directors or o | fficers have not been |
| selected, by an incorporator – if in the hands of a receiver. | |
| appointed fiduciary by that fiduciary) | |
| DAURY E | SCALANTE |
| (Typed or printed name of person signi | ng) |
| Presiti | Seul |
| (Title of person signing) | |