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## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: D.T.M.P. INC				
DOCUMENT NUMB					
The enclosed Articles o	of Amendment and fee are su	bmitted for filing.			
Please return all corres	pondence concerning this ma	tter to the following:			
	GLORIA GARVEY COX				
-	Name of Contact Person				
		N/A			
•	·	Firm/ Company	· <del></del>		
	18400 NW 2ND AVENUE				
•		Address			
	MIAMI GAEDENS, FL 3310	69			
•		City/ State and Zip Cod	e		
<u></u>	-l-u mar	oil. Com			
Inc	Manabure Ocym E-mail address: (to be us	sed for future annual report	notification)		
		•			
For further information	concerning this matter, pleas	se call:			
GLORIA GARVEY C	OX	305790-809	7		
SLORIA GARVEY COX at (305790-8097)  Name of Contact Person at (305790-8097)  Area Code & Daytime Telephone Num		<u></u>			
Name o	n Confact Person	Area Co	de & Daytine Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
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		
Amendment Section Division of Corporations		Amendment Section Division of Corporations			
	Box 6327	Clifton Building			
Tallahassee, FL 32314		2661 Executive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment Articles of Incorporation of

, D.T.M.P. INC

## (Name of Corporation as currently filed with the Florida Dept. of State) P17000086586 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: N/A name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS ) N/A N/A C. Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) N/A D. 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: N/A Name of New Registered Agent N/A (Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature 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 Doc 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	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	P	MILLER,SARAI	18400 NW 2ND AVENUE
Add			MIAMI GARDENS, FL 33169
X Remove			
2) X Change	<u>v</u>	COX, GLORIA GARVEY	18400 NW 2ND AVENUE
Add			MIAMI GARDENS, FL 33169
Remove			
3 ) Change	P	COX, GLORIA GARVEY	18400 NW 2ND AVENUE
XAdd			MIAMI GARDENS, FL 33169
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add	<del></del>		
Remove			

attach additional sheets, if necessary).	(Be specific)
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ran amendment provides for an exc provisions for implementing the am	change, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	Change of the contained in the amendment total
	\ \\

	11/06/2017	
The date of each amendme date this document was signed	nt(s) adoption:	, if other than the
date this document was signe	11/06/2017	
Effective date <u>if applicable</u>	:	
	(no more than 90 days after amendment file date)	
	n this block does not meet the applicable statutory filing requirements, this the Department of State's records.	date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
	ere adopted by the shareholders. The number of votes east for the amendme were sufficient for approval.	ent(s)
	vere approved by the shareholders through voting groups. The following state ded for each voting group entitled to vote separately on the amendment(s):	ement
"The number of vot	es cast for the amendment(s) was/were sufficient for approval	
by	N/A	
	(voting group)	
☐ The amendment(s) was/w action was not required.	ere adopted by the board of directors without shareholder action and shareholder	older
The amendment(s) was/w action was not required.	rere adopted by the incorporators without shareholder action and shareholder	
Dated	11-07-17	
	(By a director, president or other officer – if directors or officers have not be selected, by an incorporator – if in the hands of a receiver, trustee, or other of	
	appointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	- · · <del></del>