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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	RATION: Delimeter Inc		_
DOCUMENT NUM	D1700000000		
The enclosed Articles	s of Amendment and fee are st	ibmitted for filing.	
Please return all corre	espondence concerning this ma	atter to the following:	
	Chandra Kethi-Reddy		
		Name of Contact Person	n
	Delimeter Inc		
		Firm/ Company	
	2122 Westbourne Dr		
		Address	
	Oviedo, FL 32765		
		City/ State and Zip Cod	¢
chan	dra.kethireddy@gmail.com		
		sed for future annual report	notification)
	,		,
For further information	on concerning this matter, pleas	se call:	
Chandra Kethi-Reddy	у	at (2213437
Name	of Contact Person		de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
■ \$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)
Am Div	iling Address endment Section ision of Corporations Box 6327	Amend Divisio	Address ment Section on of Corporations Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Delimeter Inc. (Name of Corporation as currently filed with the Florida Dept. of State) P17000097055 (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: Delimiter Inc 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." N/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 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) N/A 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 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> <u>Jo</u>	ohn <u>Doe</u>	
X Remove	<u>v</u> <u>w</u>	like Jones	
X Add	<u>sv</u> <u>s</u>	ally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
I) N/A Change			
Add			
Remove			
2) N/A Change			
Add			
Remove			····
3) N/A Change			
Add			
Remove			
4) N/A Change			
Add			
Remove			
5) N/A Change			
Add			
Remove			
6) N/A Change			
Add			
Remove			

F. If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
N/A	
F. If an amendment provides for an each	ange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	

	N/A	
The date of each amendment(s)	doption:	, if other than the
date this document was signed. N/		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amend	lment file date)
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filinepartment of State's records.	ng requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ac by the shareholders was/were s	opted by the shareholders. The number of votes e ufficient for approval.	ast for the amendment(s)
	proved by the shareholders through voting groups reach voting group entitled to vote separately on	
"The number of votes case	t for the amendment(s) was/were sufficient for app	oroval
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were accion was not required.	opted by the board of directors without shareholde	er action and shareholder
The amendment(s) was/were action was not required.	opted by the incorporators without shareholder ac	tion and shareholder
1/1/2018 Dated		
Signature	- Landa	
	director, president or other officer - if directors or	officers have not been
	ed, by an incorporator – if in the hands of a receive	er, trustee, or other court
аррої	nted fiduciary by that fiduciary)	
	Chandra Kethi-Reddy	
	(Typed or printed name of person sig	ning)
	President	
	(Title of person signing)	