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And

OCT 18 PH 4: 23 ETANY OF STATE LAHASSEE, FL

R. WHITE OCT 25 2018

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION:	DELIZIOSA,INC		
	000020250		
The enclosed Articles of Amend	<i>ment</i> and fee are su	bmitted for filing.	
Please return all correspondence	concerning this ma	tter to the following:	
PIERINO	SUCCURO		
		Name of Contact Person	1
		Firm/ Company	
2863 BEI	LAROSA CIRCLI	2	
~ <del>~~</del> ~		Address	
ROYAL	PALM BEACH, FL	. 33411	
		City/ State and Zip Cod	2
DBURNS4901(	@AOL.COM		
E-ma	il address: (to be us	sed for future annual report	notification)
For further information concerning	ng this matter, pleas	se call:	
DIANE BURNS		at (	793-8536
Name of Contact Person Area Code & Daytime Telephone Num		de & Daytime Telephone Number	
Enclosed is a check for the follow	wing amount made	payable to the Florida Depa	artment of State:
	3.75 Filing Fee & rtificate 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 Addr Amendment So Division of Co P.O. Box 6327 Tallahassee, F.	ection rporations	Ameno Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

## FILED

DELIZIOSA, INC.		2018 OCT 18 PM 4: 23	
(Name of Co	rporation as currently	filed with the Florida Dept. of State)	
P18000020250		TALLAHASSEE, FL	
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006. its Articles of Incorporation:	, Florida Statutes, this <i>F</i>	Florida Profit Corporation adopts the following amendm	ient(s) to
A. If amending name, enter the new name of	of the corporation:		
N/A		The ne	и,
	"Corp," "Inc," or "C	"," "company," or "incorporated" or the abbreviation.". A professional corporation name must contain the	<i>m</i>
B. Enter new principal office address, if app	nlicable	N/A	
(Principal office address MUST BE A STREET			
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFF)			
D. If amending the registered agent and/or new registered agent and/or the new reg			
N/A			
Name of New Registered Agent			
	(Florida stree	et address)	
New Registered Office Address:		, Florida	
	(1	City) (Zip Code)	
New Registered Agent's Signature, if change I hereby accept the appointment as registered.		ith and accept the obligations of the position.	
	Signature of New Re	egistered Agent, if changing	

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, an 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 i. 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	PT	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	Р	PASCAL SUCCURRO	205 E 18TH ST
Add			HIALEAH, FL 33010
Remove	P	PIERINO SUCCURRO	2863 BELLAROSA CIRCLE
2) Change X Add	<del>.</del>		ROYAL PALM BEACH, FL 3341
Remove			<del></del> -
3 ) Change			
Remove			
4) Change			
Add Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	(Be specific)
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If an amendment provides for an exch	ange, reclassification, or cancellation of issued shares.
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, and and an analysis of the amendment itself:
If an amendment provides for an exch provisions for implementing the amer (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, ndment if not contained in the amendment itself:
provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, andment if not contained in the amendment itself:
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provisions for implementing the amer	range, reclassification, or cancellation of issued shares.  Induced in the amendment itself:

The date of each amendment(s	adoption:	, if other than th
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date. Department of State's records.	te will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
■ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(se sufficient for approval.	)
	approved by the shareholders through voting groups. The following stateme for each voting group entitled to vote separately on the amendment(s):	nt
"The number of votes of	east for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholde	r
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
AUGU Dated	51 28. 2018	
Signature		
(By sele	a director, president or other officer – if directors or officers have not been exted, by an incorporator – if in the hands of a receiver, trustee, or other count ointed fiduciary by that fiduciary)	
	PIERINO SUCCURRO	
	(Typed or printed name of person signing)	
	PRESIDENT 070 MORE	
	(Title of person signing)	