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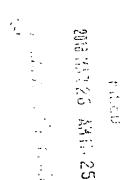
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C. GOLDEN MAR 2 7 2018

COVER LETTER

TO: Amendment Section Division of Corpora				
NAME OF CORPORA	TION: DOMI	SERVICES,	INC	
DOCUMENT NUMBER: P 18000022665				
The enclosed Articles of	Amendment and fee are su	bmitted for filing.		
Please return all correspo	ndence concerning this mat	ter to the following:		
_	Luis	DOMINGUEZ Name of Contact Person	1	
Firm/ Company				
	13121	SW 284 ST		
			.0.23	
_	1,01-163	TEAD FL 33 City/ State and Zip Code	÷	
E-mail address: (to be used for future annual report notification)				
	12-mail address. (to the us	ed for fature aimual report	nouncations	
For further information co	oncerning this matter, pleas	e call:		
	DOMINGUEZ		, 246 - 6218	
Name of C	Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the	e following amount made p	payable to the Florida Depa	urtment 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)	
	g Address		Address	
Amendment Section Division of Corporations			ment Section n of Corporations	
P.O. Box 6327 Clifton Building				
Tallahassee, FL 32314 2661 Executive Center Circle			xecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment

 $\tilde{x}\in \Omega_k$ 25

	Articles of Incorp	oration	2016 11 To 2	3 MH:2
Down	of STOULTEC	Tax	2010 11 12	2 Milling
(Name of Corporat	tion as currently file	ed with the Florida Dep	ot. of State)	
\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	2180000	22665	.'	م ما
(Docu	ment Number of Co	rporation (if known)		
Pursuant to the provisions of section 607.1006, Floric its Articles of Incorporation:	da Statutes, this <i>Flo</i>	rida Profit Corporation a	adopts the following a	nendment(s) to
A. If amending name, enter the new name of the c	corporation:			
name must be distinguishable and contain the wo "Corp.," "Inc.," or Co.," or the designation "Corpword "chartered," "professional association," or the	rd "corporation," ກ," "Inc." or "Co"	'. A professional corpor	oorated" or the abbr	ne new eviation tain the
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET AD		N/A		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	- <u>OX</u>) -	N/A		
D. If amending the registered agent and/or registered new registered agent and/or the new registered Name of New Registered Agent		in Florida, enter the na	me of the	
New Registered Office Address: N/A	(Florida street d	iddress)	. Florida	
	(Cit	y)	(Zip Cod	e)
New Registered Agent's Signature, if changing Re I hereby accept the appointment as registered agent. NA Signature, if changing Re I hereby accept the appointment as registered agent.	l am familiar with	and accept the obligation		

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	PT John D	<u>oe</u>	
X Remove	<u>V</u> <u>Mike Jo</u>	<u>ones</u>	
X Add	SV Sally S	<u>mith</u>	
Type of Action (Check One)	Title	Name	Address
1) Change		N/A	
Add			
Remove			
2) Change		NA	
Add			- <u>-</u>
Remove		/ ^	
3) Change		N/A	-
Add			
Remove			
4) Change		N/A	
Add			
Remove			
5) Change		N/A	
Add			
Remove			
6) Change		N/A	
Add		· ———	
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
N/A
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
N/A

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date document's effective date on the Department of State's records.	will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated $03/20/20/8$	
Signature	
(By a director president or other officer – if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
LUIS DOMINGUEZ	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	