P18000024505

(Requestor's Name)		
(Addres	s)	-
(Addres	ss)	
(City/St	ate/Zip/Phone	e #)
PICK-UP	TIAW	MAIL
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(Docum	ent Number)	
Certified Copies	Certificates	s of Status
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10/27/20--01023--019 **43.75

SECRETARY OF STATE

12/01/20



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION:DA PROGRESIV	'E BEHAVIOR. INC	
	BER: P18000024505		···
	s of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	tter to the following:	
	DAYANA SOSA PEREZ		
		Name of Contact Person	<u> </u>
	DA PROGRESIVE BEHAV	TOR, INC	
		Firm/ Company	
	25494 SW 122 PL		
		Address	
	MIAMI FL 33032		
		City/ State and Zip Code	
	niovisa@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call: _786	484-4911
	of Contact Person	at {	_)
	or the following amount made		•
S35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	illing Address		Address
	nendment Section vision of Corporations		ment Section n of Corporations
P.O. Box 6327 The Centre of Tallahassee			
		2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED

DA PROGRESIVE BEHAVIOR, INC.

2020 OCT 27 PM 3: 03

(<u>Name (</u>	of Corporation as curren	ly filed with the Florida B	ept.of.State)
P18000024505	TALLAPASSES SI		
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation	n adopts the following amendment(s)
A. If amending name, enter the new na	ame of the corporation:		
N/A			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C" chartered," "professional association,"	Corp." "Inc." or "Co".	A professional corporation	ed" or the abbreviation "Corp.,"
B. Enter new principal office address,	if annlicable:	N/A	
(Principal office address <u>MUST BE A S</u>			
			
C. Enter new mailing address, if appli		N/A	
(Mailing address <u>MAY BE A POST</u>)	<u>OFFICE BOX</u>)		
			0.4
D. If amending the registered agent an new registered agent and/or the new			name of the
Name of New Registered Agent	N/A	_	
Name by New Registered Agent			
	(Florida s	reet address)	
	N/A		
New Registered Office Address:		(City)	, Florida (Zip Code)
		• •	•
New Registered Agent's Signature, if c	hanging Registered Agen	<u>t:</u>	
I hereby accept the appointment as regist	erea agent Lam familiar	with and accept the obligat	ions of the position.
	Signature of New	Registered Agent, if changir	ıg

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 Remove Y Mike Jones _X Add SV Sally Smith Type of Action (Check One) Title Name Address 1) Change	
Type of Action Title Name Address (Check One)	
(Check One)	
1) Change	
Add	
Remove	
2) Change	
Add	
Remove	
Add	
Remove	
4) Change	
Add	
Remove	
5) Change	
Add	
Remove	
6) Change	
Add	
Remove	

E. <u>If ame</u> (Attach	ending or adding additional Articles, enter change(s) here: additional sheets, if necessary). (Be specific)	
	SING THE PURPOSE (SPECIFIC NATURE OF BUSINESS) FROM SERVICES TO RETAIL, GENERAL S	SALE
_		
·		
	.	
4. <u>If an a</u>	mendment provides for an exchange, reclassification, or cancellation of issued shares,	
<u>prov</u> i	sions for implementing the amendment if not contained in the amendment itself: if not applicable, indicate N/A)	
N/A	у пот ирупсилге, тисите 1921	
		-

The date of each amendment(s) ado date this document was signed.	otion:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment fil	e date)
Note: If the date inserted in this blocdocument's effective date on the Department.	ck does not meet the applicable statutory filing requirement of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators, or board of directors without	shareholder action and shareholder
■ The amendment(s) was/were adopt by the shareholders was/were suff	ed by the shareholders. The number of votes cast for cient for approval.	the amendment(s)
	ved by the shareholders through voting groups. The f ch voting group entitled to vote separately on the ame	
"The number of votes cast fo	the amendment(s) was/were sufficient for approval	
bv	<u></u>	
	(voting group)	
10/21/2020 Dated		
Signature	SEST!	
selected.	ctor, president or other officer – if directors or officer, by an incorporator – if in the hands of a receiver, trust fiduciary by that fiduciary)	
D	AYANA SOSA PEREZ	
_	(Typed or printed name of person signing)	· · · · · · · · · · · · · · · · · · ·
P		
_	(Title of person signing)	