## P180008101

(Re	questor's Name)	
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( <u>\</u>	dress)	
(Au	uress)	
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

OCT 2 6 2018 S. YOUNG

## COVER LETTER

**TO:** Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPORATION:	DASHY 1	NC.	
DOCUMENT NUMBER:	P1800008	2101	
The enclosed Articles of Amend	nent and fee are submitted	I for filing.	
Please return all correspondence	concerning this matter to t	he following:	
	E.J.i	jardo Loza	w¢
	Nan	ne of Contact Person	1
	Ţ.	Firm/Company	
	347 N NOW Riv	ver Dr E. Address	Apt 906
	Ft Lauderdat City	<u>IP FL , 333</u> / State and Zip Code	<u>01</u>
E-ma	Eduardo. 94.	LOZANO(A) a future annual report	mal. om hotification)
For further information concerning	ng this matter, please call:		
Eduardo L	<u>22000</u> Person	at ( <u>959</u> Area Cod	) <u>552 - 6694</u> de & Daytime Telephone Number
Enclosed is a check for the follow	ang amount made payable	to the Florida Depa	rtment of State:
S35 Filing Fee  S41	tificate of Status — Ce (Ac	3.75 Filing Fee & rtified Copy Iditional copy is closed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Addr			Address
Amendment Se Division of Co			ment Section n of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

Arti	icles of Incorporation of
J	DASHV INC.
	is currently filed with the Florida Dept. of State)
	P18000087101
(Document	Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statis Articles of Incorporation:	ntutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corpo	oration;
	The new
	corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the reviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u></u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	18 OCT 19 PA
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office.	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida (City) (Zip Code)
	(CIŅ) (Zip Code)
New Registered Agent's Signature, if changing Register I hereby accept the appointment as registered agent. I an	red Agent: or familiar with and accept the obligations of the position.
	re 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>John</u>	Doc	
X Remove	<u>V</u> <u>Mike</u>	2 Jones	
X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) X Change	P	Eduardo Lozano	347 N. New River Dr. E.
Add			Ap+ 906
Remove			Ft Lauderdale FL 33301
2) X Change	VTS_	Sandra M. Villada	3097 NW 94th Aup
Add			Coral Springs FL 33065
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
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 ot	her than the
date this document was signed.		
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
<b>Note:</b> If the date inserted in this block does not document's effective date on the Department of St	meet the applicable statutory filing requirements, this date will not be late's records.	listed as the
Adoption of Amendment(s) (CHE	<u>CK ONE</u> )	
☐ The amendment(s) was/were adopted by the sh by the shareholders was/were sufficient for app	nareholders. The number of votes east for the amendment(s) proval.	
	shareholders through voting groups. The following statement croup entitled to vote separately on the amendment(s):	
"The number of votes east for the amende	ment(s) was/were sufficient for approval	
hy	eg group)	
action was not required.	oard of directors without shareholder action and shareholder action and shareholder action and shareholder	
	ent or other officer – if directors or officers have not been porator – if in the hands of a receiver, trustee, or other court by that fiduciary)	
	Edvardo_Lozano yped or printed name of person signing)	_
	CEO	
	(Title of person signing)	