P180000087098

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2018 NOV -5 PH 12: 61

Amend

NOV 0 8 2018

I ALBRITTON

COVER LETTER

TO: Amendment Section

Division of Corporations DOT HOLDINGS INC 18000087098 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: BOT HOUNGS INC Firm/ Company 2217 POYAL CANE NAPLES FL 34/12

City/ State and Zip Code mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Street Address Mailing Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation of

DM F	town 65	INC		
(Name of Corpor	ation as currently file	ed with the Florida	a Dept. of State)	
PIR	000087098)		
	cument Number of Col)	
Pursuant to the provisions of section 607,1006. Flor its Articles of Incorporation:	rida Statutes, this <i>Flor</i>	ida Profit Corpora	tion adopts the fo	llowing amendment(s) to
A. If amending name, enter the new name of the	corporation:			
name must be distinguishable and contain the w "Corp.," "Inc.," or Co.," or the designation "Co- word "chartered," "professional association," or t	orp," "Inc," or "Co"	. A professional c	ncorporated" or orporation name	The new the abbreviation must contain the
B. Enter new principal office address, if applica	ble:			~~~~
(Principal office address MUST BE A STREET A				西雪 小
	-			# 1 F
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	D()V)			3 -
(Matting address SIAT DE ATOST OFFICE I	<u> </u>			25.
	_			
	_		····	<u> </u>
D. If amending the registered agent and/or registered agent and/or the new register		<u>in Florida, enter tl</u>	he name of the	
Name of New Registered Agent				
	(Florida street a	(ddress)		
New Registered Office Address:			. Florida	
wen negrated office nations.	(Ciry	v)	,	(Zip Code)
w n	No francisco de Associación			
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agen	Registered Agent: it. I am familiar with	and accept the obli	gations of the pos	ition.
	ignature of New Regis	tered Agent, if char	nging	

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 I)oe	
X Remove	V Mike	Jones .	
_X Add	<u>SV</u> <u>Sally S</u>	<u>Smith</u>	
Type of Action (Check One)	Title	<u>Name</u>	Address
Change Add	<u>V</u>	Kemeth Eisenland	2217 ROYALCANA NARES FL 34112
Remove			
2) Change			
Add Remove			
3) Change	 -		
Add Remove			
4) Change			
Add			
Remove			-
5) Change Add			
Remove			
6) Change			
Add			

ruacii aaamonai	dding additional Articles, enter change(s) here: sheets, if necessary). (Be specific)
	sneets, if necessary). (Be specific)
	
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_	
<u>f an amendment</u>	provides for an exchange, reclassification, or cancellation of issued shares,
provisions for in	nplementing the amendment if not contained in the amendment itself:
	cable, indicate N/A)
(if not applic	
(IJ not applic	
(IJ not applic	
(IJ not applic	
(if not applic	

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
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 wi document's effective date on the Department of State's records.	Il not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ 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)	
(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.	
ulalia	
Dated (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)	
TRACY A WAVEH	
(Typed or printed name of person signing)	
PRESONT	
(Title of person signing)	<u>_</u> _