P180000 91796

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	Delta Tek Corp.			
NAME OF CORPO	P18000091796	<u>.</u>		
DOCUMENT NUN	1BER:			
The enclosed Article	es of Amendment and fee are su	ibmitted for filing.		
Please return all corr	respondence concerning this ma	itter to the following:		
	Carlos Florez			
		Name of Contact Person	n	
	Delta Tek corp.			
	8264 NW South River Driv	Firm/ Company re		
	Medley, Florida 33166	Address		
		City/ State and Zip Cod	e	
С	F@deltatekcorp.com	,		
_	E-mail address:	to be used for future annua	l report notification)	
For further informati	ion concerning this matter, pleas	oo ooll		
roi lutiliei iliformati	ion concerning this matter, pieas	se can:		
Carlos Florez		786	702-8312 	
Name	e of Contact Person		de & Daytime Telephone Number	
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment 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)	
Mailing Address		Street	Address	
	mendment Section		lment Section	
Division of Corporations		Division of Corporations		
	O. Box 6327 Illahassee, FL 32314		Building executive Center Circle	
1 8	manasce, FL 34314	2001 E	ACCULIVE CONTEST CHEE	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

N/A					
(Name of Corporation as	currently filed with the Flo	rida Dept. of State)		-	
(Documer	nt Number of Corporation (if k	(nown)		-	
Pursuant to the provisions of section 607 Incorporation:	.1006, Florida Statutes, this co	orporation adopts the fol	lowing amendment(s	s) to its a	Articles of
A. If amending name, enter the new na N/A	ame of the corporation:				
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp," "Inc," or "Co	o". A professional corpe			ion
B. Enter new principal office address. (Principal office address MUST BE A S				-	
				_	
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)			· · · · · · · · · · · · · · · · · · ·	-	
				-	
D. If amending the registered agent an new registered agent and/or the new		ss in Florida, enter the n	ame of the		
Name of New Registered Agent	FORE NUMBER OF ADTES		_		
	5955 NW 105 CT, APT 51				
	(Florida stre	el adaress)	22179		
New Registered Office Address:		, Flori	da <u> </u>	20	
	(City)		(zip Cone)	19 JUL	7
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Agent: tered agent. I am familiar wi	th and accept the obligati	ons of the postikan.	15 PH	
Si	gnature of New Registered Ag	ent, if changing	<u> </u>	5: 42	"beared"

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	PT Jo	ohn Doe	
X Remove	<u>V</u> <u>M</u>	fike Jones	
X Add	<u>SV</u> <u>S</u>	ally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
	VP	DAMAS, JORGE L	3280 NW 96 AVE
1) Change Add Remove			SUNRISE, FL 33351
2) Change	VP	FERNANDEZ, JAVIER	17325 NW 61 PLACE
Add X			HIALEAH, FL 33015
Remove X 3) Change	P	CARLOS FLOREZ	5955 NW 105 CT
Add	•	· · ·	APT 511
Remove			DORAL, FL 33178
4) Change			
Add			
Remove			
5) Change			_
Add			
Remove			
6) Change			
Add			

	
<u> </u>	
	- Dati- of issued above
f an amendment provides for an exchange, reclassification, or cand provisions for implementing the amendment if not contained in the	e amendment itself:
(if not applicable, indicate N/A)	
Nr/A.	·
W/A.	

JUNE 1, 2019

A Company

The date of each amendment(s) a	, if other than th	
date this document was signed. JUN		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes east for the amendment(s) fficient for approval.	
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder	
DatedOC	2/09/2019.	
Signature	######################################	
(By a d) selected	dector, president or other officer – if directors or officers have not been l, by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	_
	CARLOS FLOREZ	
•	(Typed or printed name of person signing)	·
	PRESIDENT	
	(Title of person signing)	