P190000 13961

(Requestor's Name)	
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APR 12 2019 S. YOUNG

COVER LETTER

TO: Amendment Section Division of Corporations	
CDV CORP	
SUBJECT: Name	of Corporation
DOCUMENT NUMBER: P19000013961	
The enclosed Amendment and fee are subm	nitted for filing.
Please return all correspondence concerning	g this matter to the following:
MARGARET KIOUSIS	
Name of Contact Person	-,
TIMELESS STUDIO SRL	
Firm/Company	
8550 NW 17TH STREET; SUITE 110B PP-93930	
Address	
DORAL, FL 33126	
City/State and Zip Code	
info@caribbeandreamsdr.com	
E-mail address: (to be used for future annual	ual report notification)
For further information concerning this mat	tter, please call:
MARGARET KIOUSIS	829 479-7420
Name of Contact Person	at () Area Code & Daytime Telephone Number
Enclosed is a check for the following amou	nt:
X \$35,00 Filing Fee \$43,75 Filing Fee & Certificate of Statu	
Mailing Address: Amendment Section	Street Address: 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

		
(Name of Corporation as current P19000013961	ntly filed with the Florida	Dept. of State)
(Document Number	of Corporation (if known)	¥ 10a
Pursuant to the provisions of section 607,1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporati	on adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:		
CADREVA HOLDINGS CORP		The new
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional co	corporated" or the abbreviation
B. Fratan nav. principal office address if applicable.	N/A	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	 	9
		7 PR T
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A	
		<u> </u>
		٠٠٠ - ١٠٠٠
		5
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre		
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office address N/A Name of New Registered Agent		
new registered agent and/or the new registered office addre		
new registered agent and/or the new registered office address N/A Name of New Registered Agent		
new registered agent and/or the new registered office address N/A Name of New Registered Agent	<u>:ss:</u>	

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	<u>PT</u>	John Do	<u>e</u>		
X Remove	<u>v</u>	Mike Jor	nes		
X Add	<u>sv</u>	Sally Sm	n <u>ith</u>		
Type of Action (Check One)	<u>Title</u>		Name		Address
1) Change		_	N/A 	<u>. </u>	
Add					
Remove					
2) Change				<u>_</u>	
Add					
Remove					
3) Change		_			
Add					
Remove					
4) Change					
Add					
Remove					
5) Change		_			
Add					
Remove					
6) Channa					
6) Change	<u></u>	<u>—</u>			
Add					
Remove					

E. If amend	<u>ding or adding additional Art</u>	ticles, enter change(s) here:	
	dditional sheets, if necessary).	(Be specific)	
N/A			
•			
	 		
		<u> </u>	
			
F. If an am	endment provides for an excl	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
	not applicable, indicate N/A)	endment it not contained in the amendment risen:	
N/A	· · · · · · · · · · · · · · · · · · ·		
	<u>.</u>		
_			
			

	03/31/2019	
The date of each amendment(s)	adoption:	, if other than the
date this document was signed.		
	4/01/2019	
Effective date if applicable:		
	(no more than 90) days after amendment file date)	
Note: If the date inserted in this document's effective date on the	s block does not meet the applicable statutory filing requirements, this department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were a by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(sufficient for approval.	(s)
	approved by the shareholders through voting groups. The following statem for each voting group entitled to vote separately on the amendment(s):	ent
The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	<u>.</u>	
	(voting group)	
action was not required.	adopted by the board of directors without shareholder action and sharehold adopted by the incorporators without shareholder action and shareholder	er
03/31/20	110	
	119	
Dated	1/2	
Signature	11 mac win	
(By 8	director, president or other officer if directors or officers have not been	
selec	cted, by an incorporator - if in the hands of a receiver, trustee, or other cou	ırt
аррс	pinted fiduciary by that fiduciary)	
	MARGARET KIOUSIS	
	(Typed or printed name of person signing)	
	VICE PRESIDENT	
	(Title of person signing)	

. . .