P19000014489

(Requesto	or's Name)
(Address)	•
(Address)	
(City/State	e/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business	Entity Name)
(Documer	nt Number)
Certified Copies	Certificates of Status
Special Instructions to Filing	Officer:





800418155338

10/30/23--01034--012 **43.75

1011.12



COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Dorkan Francial Group Inc DOCUMENT NUMBER: P19000 14489 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Name of Contact Person Dorkan Financial Group. Inc

Firm/ Company

12501 S. Gardens Dryc Unit 102

Address

Palm Beach Genders Fl. 541 33418

City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Juret Dorlan at 443, 790-4900

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$43.75 Filing Fee & □\$43.75 Filing Fee & ☐ \$35 Filing Fee ☐\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Taltahassee, FL 32314 Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

is enclosed)

Tallahassee, FL 32303

Articles of Amendment

to

Articles of Incorporation

of

Docker Financial Gray T	In C			
(Name of Corporation as currently	filed with the Florida Dept. of State)			
P19 000014489				
(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:				
name must be distinguishable and contain the word "corporation," "co". "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	The new company, "or "incorporated" or the abbreviation "Corp.," professional corporation name must contain the word 12501 5. Gardens Drive Unit 102 Palm Beach Gerdens Fl. 33418			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:				
Name of New Registered Agent Must Dor	Kan			
New Registered Office Address: Palm Beach Gardens Palm Beach Gardens Florida Street address: Palm Beach Gardens Florida 33418				
New Registered Office Address: Palm Beach (City) Florida 33418			
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w				
Signature of New Registered Agent, if changing				

Check if applicable

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

NA

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> Joh	nn Doe	
X Remove	<u>V</u> <u>Mil</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	YP	Linda Dorkan	12501 S. Gardens Dr. Un+ 10
Add			12501 S. Gardens Dr. Un+ 10? Palm Beach Coddens, Fl
Remove			33418
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			<u> </u>
Add			<u> </u>
Kemove			
5) Change			~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)		
	A N/2		
	MA		
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•			_
			_
			_
			
an amendment provides for an excha	inge, reclassification, or cancellation of issued shares,		
(if not applicable, indicate N/A)	dment if not contained in the amendment itself:		
			_
	$\mathcal{N}_{\mathcal{A}}$		
	,		_
			_
			_
		·	
			_

The date of each amendment(s) adoption: _	NA	, if other than the
date this document was signed.	Dole Signed	
Effective date if applicable:		
	(no more than 90 days after ame	ndment file date)
Note: If the date inserted in this block does document's effective date on the Department	not meet the applicable statutory fi of State's records.	iling requirements, this date will not be listed as the
Adoption of Amendment(s) (C	HECK ONE)	
The amendment(s) was/were adopted by the action was not required.	e incorporators, or board of directors	s without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient fo	e shareholders. The number of voter approval.	s cast for the amendment(s)
☐ The amendment(s) was/were approved by t must be separately provided for each votin	he shareholders through voting grouggroup entitled to vote separately o	ps. The following statement on the amendment(s):
"The number of votes cast for the am	endment(s) was/were sufficient for a	approval
by(vo	oting group)	
Dated10 /2.6	12023	
Signature		
(By a director, pre selected, by an inc	sident or other officer – if directors of orporator – if in the hands of a receive by that fiduciary)	or officers have not been iver, trustee, or other court
	Must Derles (Typed or printed name of person si	
	(Typed or printed name of person si	igning)
	President	
	(Title of person signing)	· (a)
		-
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