## P19000047992

(Re	equestor's Name)			
(Ad	ldress)			
(Ad	ldress)	<u> </u>		
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	MAIT	MAIL		
(Bu	isiness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer.				

Office Use Only



900331219569

07/05/19--01004--008 ++35.C

PALL PHE ASS. TO CAUDA

A JUL -5 PH +: 13

O PYCHYING OF SOID

JUL 0 8 2017

CÍ

## **©ORPORATE** ACCESS, \_

When you need ACCESS to the world

INC.

236 East 6th Avenue, Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

## **WALK IN**

		PICK U	P: <u>07/03/2019</u>	
		CERTIFIED COPY		
	хх	РНОТОСОРУ		
		CUS		
	хx	FILING	AMENDMENT	
1.		CDM FAMILY ENTERPRI		
		(CORPORATE NAME AND DOCUMEN	IT #)	
2.		(CORPORATE NAME AND DOCUMEN	IT #)	
3.		(CORPORATE NAME AND DOCUMEN		
4.		(CORPORATE NAME AND DOCUMEN	UT #)	
5.		(CORPORATE NAME AND DOCUMEN	VT #)	
6.		CORDODATE NAME AND DOVING	107 H)	
		(CORPORATE NAME AND DOCUMEN	6 1 म )	
SPI	ECIA	L INSTRUCTIONS:		

## Articles of Amendment to Articles of Incorporation of



CDM Family Enterpise Corp.

(Name of Corporation as currently filed with the Florida Dept. of State)
P19000047992
(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 amendmits Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
CDM Family Enterprise Corp.  The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviatio "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable:
(Principal office address <u>MUST BE A STREET ADDRESS</u> )
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
want by New Neglat real agent
(Florida street address)
New Registered Office Address:, Florida
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
петену ассерь нье арронитем их гедімства адені. Тат затишт мин ала ассерь інв отядають од нів ромиют.
Signature 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, nam 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 = Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each 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. To 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 Cl-Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT	John Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change		<del>-</del>	
Add			
Remove			
2) Change			
Add			
Remove			
3 ) Change			
Add			
Remove			
4) Change		_	
Add			
Remove			
5) Change			
Add			
Remove			
() Characa			
6) Change	******* <u>*****</u>		
Add			
Remove			

(Attach additional:	ding additional Arcsheets, if necessary).	(Be specific)			
	<del></del>	,	·		
				<del></del> -	
				<del></del>	
				_	
	<del></del>				
					11=1
-			_		
					<del></del>
If an amendment	provides for an exc	hange, reclassific	ation, or cancella	ition of issued shares	ì.
provisions for in	plementing the am	endment if not co	ntained in the an	nendment itself:	<u>.</u>
	able, indicate N/A)				
				-	
	-				

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 amendme)	nt file date)
Note: If the date inserted in this block does not meet the applicable statutory filling redocument's effective date on the Department of State's records.	equirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes east by the shareholders was/were sufficient for approval.	for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The must be separately provided for each voting group entitled to vote separately on the	
"The number of votes cast for the amendment(s) was/were sufficient for approve	nl
by	_, <b>"</b>
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder acaction was not required.	rtion and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action action was not required.	and shareholder
Dated 737019	
Signature Dans Vene	la al
(By a director, president or other officer – if directors or officer selected, by an incorporator – if in the hands of a receiver, the appointed fiduciary by that fiduciary)	
Daniel Maradiaga	
(Typed or printed name of person signing	()
President	
(Title of person signing)	