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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION: Dasal Cabinets INC			
DOCUMENT NUMBE	CR: P19000060859	<u> </u>		
The enclosed Articles of	Amendment and fee are su	bmitted for filing.		
Please return all correspondent	ondence concerning this mat	ter to the following	ā :	
A	ARTHA LUCIA ALVARE	Z		
_	<u>-</u>	Name of Contac	ct Person	· · · · · · · · · · · · · · · · · · ·
_		Firm/ Comp	pany	
Pe	O Box 152375			
_		Address	s	
C	ape Coral FL 33915			
_		City/ State and 2	Zip Code	
dasalcal	oinets@gmail.com			
	E-mail address: (to be us	ed for future annua	al report n	otification)
For further information of	concerning this matter, pleas	e call:		
Martha Lucia Alvarez		239 at (214-4314
Name of	Contact Person	,	Area Code	2 & Daytime Telephone Number
Enclosed is a check for t	he following amount made p	payable to the Flori	ida Depart	ment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Certified Copy (Additional copenciosed)	y py is	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 32314			Division Clitton F	nent Section of Corporations

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

Dasal Cabinets INC						
(Name of Corporation	ı as curren <u>tly f</u>	filed with the Flo	rida Dept. of Stat	<u>e)</u>		
P19000060859						
(Docume)	nt Number of C	Torporation (if kno	own)			
Pursuant to the provisions of section 607,1006, Florida Sits Articles of Incorporation:	Statutes, this <i>Fl</i>	orida Profit Corp	oration adopts the	following	i amendi	ment(s)
A. If amending name, enter the new name of the corp	poration:					
					The n	ew.
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp.," word "chartered," "professional association," or the al	"Inc," or "Co	o". A professione			- breviati	on
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDR</u>	RESS)					-
				AC.	2019	-
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX))			LAMA	AUG 22	اعدادا اعدادا آ
				φ, Fi., Fo.,	PH	13/
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		s in Florida, ente	er the name of the		?: 3 ₂	السية
Name of New Registered Agent						
	(Florida street	address)		<u>.</u>		
New Registered Office Address:			, Florida			-
	(C.	itv)		(Zip C	'ode)	
New Registered Agent's Signature, if changing Regist						
I hereby accept the appointment as registered agent. To	am familiar wit	h and accept the a	obligations of the p	position.		
Signati	ure of New Reg	istered Agent, if c	hanging			

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	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	S	Mariela Mayol	7905 PRESERVE CIR Naples FI 3411
X Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
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. If an amendment pro	ovides for an exch	iange, reclassifica	tion, or cancellation	of issued shares,	
. If an amendment pro	ovides for an exch ementing the ame	nange, reclassifica	tion, or cancellation itained in the amend	of issued shares, ment itself:	
. If an amendment pro provisions for imple (if not applicable	ementing the ame	nange, reclassifica ndment if not cor	tion, or cancellation itained in the amend	of issued shares, ment itself:	
provisions for imple (if not applicable	ementing the ame e. indicate N/A)	nange, reclassifica ndment if not cor	tion, or cancellation itained in the amend	of issued shares, lment itself:	
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provisions for imple (if not applicable fartha Lucia Alvarez (9	ementing the ame e. indicate N/A)	nange, reclassifica	tion, or cancellation tained in the amend	of issued shares, ment itself:	

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 will document's effective date on the Department of State's records.	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)	
☐ 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.	
08/20/2019 Dated	
Martha Lucia Alvarez	
(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 (iduciary by that fiduciary)	_
Martha Lucia Alvarez	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	