P1900000001885

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Sasiness Entry Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



20033430818

0+1187.9--01015--075

C GOLDEN
COT -2 2019

COVER LETTER

TO: Amendment Section

Division of Corpora	utions		
NAME OF CORPORA	TION: $D.J.$	CR 9 19 (ortoration
DOCUMENT NUMBE	R: 19000	067885	
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspond	ondence concerning this ma	tter to the following:	
	D.J. C.R. 1 3741 Gras ORlando Leonard 03:	Name of Contact Person Primy Company Hewood T Address City/ State and Zip Cod Hewood T Address City/ State and Zip Cod	1029 hon 318 37 Con
For further information of	E-mail address: (to be us concerning this matter, pleas	sed for future annual report	notification)
Name of	Contact Person	at (Area Co	de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Depa	nrtment 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)
Ameno Divisio	ng Address Iment Section on of Corporations ox 6327	Amend Divisio	Address Iment Section on of Corporations Building

Tallahassee, FL 32314

Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

	of	2019 SEP 18
D.J.CR A	and Corporation	
(Name of	Corporation as currently filed with the Florida	Dept. of State)
119000	0 67 885	
	(Document Number of Corporation (if known)	
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006, Florida Statutes, this <i>Florida Profit Corporat</i>	ion adopts the following air
A. If amending name, enter the new name	e of the corporation:	
1		The
	in the word "corporation," "company," or "in ion "Corp," "Inc," or "Co". A professional co on," or the abbreviation "P.A."	
B. Enter new principal office address, if		
(Principal office address <u>MUST BE A STI</u>	REET ADDRESS)	
C. Enter new mailing address, if applica (Mailing address MAY BE A POST OF		
D. If amending the registered agent and/	or registered office address in Florida, enter th	e name of the
new registered agent and/or the new i	registered office address:	
Name of New Registered Agent	Donard Jan	
_	3741 GRANDE WC	
New Registered Office Address:	Octando (City)	, Florida 3983 (Zip Code,
New Registered Agent's Signature, if cha		
I hereby accept the appointment as register	ed agent. I am familiar with and accept the oblig	ations of the position.
	NONG LOG 17 Signature of New Registered Agent, if chang	
	Signature of New Registered Agent, if chang	<i>jing</i>

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and tit 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; Executive Officer; CFO - Chief Financial Officer. If an officer/director holds more than one title, list the first letter 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 a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe. P1 Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:		ny smitt, or us un luce.	
X Change	$\overline{\mathbf{b}}$	John Doc	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name 1	Address 2
1) V Change	<u>P</u>	Sponard Jea	in 3741 Grans
Add			ORlandy Fl 3
Remove			
2) Change			
Add	,		
Remove			
3.) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	al sheets, if necessary).	(Be specific)			
				····	
	· · · · · · · · · · · · · · · · · · ·				
····				· · · · · · · · · · · · · · · · · · ·	
					· · · · · · · · · · · · · · · · · · ·
					
				<u> </u>	·
					
					•
					
an amenome	nt provides for an excl implementing the ame	nange, reciassino	ation, or cancenas	andmant itself:	<u>es,</u>
	licable, indicate N/A)	engineni ii not co	mamed in the am	entinett Rseit.	
(і) мін цірілі	neutre, maleure was				
					•
			1-14-86		
			1.12 1		

The date of each amendment(s) adoption: date this document was signed.	if
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 application document's effective date on the Department of State's records.	able statutory filing requirements, this date will not b
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The by the shareholders was/were sufficient for approval.	number of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders thro must be separately provided for each voting group entitled to v	
"The number of votes cast for the amendment(s) was/were	e sufficient for approval
by(voting group)	·••
☐ The amendment(s) was/were adopted by the board of directors action was not required.	
The amendment(s) was/were adopted by the incorporators with action was not required.	out shareholder action and shareholder
action was not required. Dated 9/12/2019 Signature 10-15-16-16-16-16-16-16-16-16-16-16-16-16-16-	
Signature X201	asd Joan
(By a director, president or other offic	er – if directors or officers have not been hands of a receiver, trustee, or other court
$\sqrt{I_a}$	pan Kennasa
(Typed or printed r	name of person signing)
Pres	oi Dent
(Title c	f person signing)