P190000 81123

(Red	questor's Name)	
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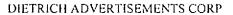
COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: DIETRICH ADVE	ERTISEMENTS CORP	
DOCUMENT NUMBE			
	*Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
		Name of Contact Person	1
	RS ACCOU	JNTING AND TAX SERV	ICES INC
	Firm/ Company		
	17	00 BANKS RD SUITE 500	3
_		Address	
	MARGATE, FL 33063		
_		City/ State and Zip Code	e
	E-mail address: (to be us	sed for future annual report	notification)
		·	
For further information of	concerning this matter, pleas	se call:	
RODRIGO P SILVA		954 at (623-7615
Name of	Contact Person		de & Daytime Telephone Number
Enclosed is a check for t	he following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ameno Divisio P.O. B	ng Address Imment Section on of Corporations ox 6327 assee, FL 32314	Amend Divisio The Co 2415 i	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, F1, 32303

11

Articles of Amendment to Articles of Incorporation of





(Name of Corporation as curre	ently filed with the Florida	Dept. of State)	
P19	000081123		
(Document Number	er of Corporation (if known)	•
Pursuant to the provisions of section 607.1006, Florida Statutes, t its Articles of Incorporation:	his <i>Florida Profit Corpora</i>	tion adopts the following ar	nendment(s) to
A. If amending name, enter the new name of the corporation	<u>i</u>		
			ie new
name must be distinguishable and contain the word "corporation, "Inc.," or Co.," or the designation "Corp," "Inc," or "Co" "chartered," "professional association," or the abbreviation "P.	. A professional corporat		
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)			<u></u>
D. If amending the registered agent and/or registered office a new registered agent and/or the new registered office additional agent.		ne name of the	
Name of New Registered Agent			
		<u>-</u>	
(Florida	a street address)		
7, 107 (66	. 311 eer aan e33)		
New Registered Office Address:	Witness .	, Florida	
	(City)	(Zip Code	')
New Registered Agent's Signature, if changing Registered Ag	ent:		
I hereby accept the appointment as registered agent. I am famili		gations of the position.	
	n to the section	· · · · · · · · · · · · · · · · · · ·	
Signature of Ne	w Registered Agent, if chan	ging	
Check if applicable			

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

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>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
I) X Change	P	DIEGO EMANUEL DIETRICH	101 SOUTH FEDERAL HWY
Add			APT 560
Remove			BOYNTON BEACH, FL 33435
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
DIEGO EMANUEL (FIRST) DIETRICH (LAST)
101 SOUTH FEDERAL HWY APT 560
BOYNTON BEACH, FL 33435
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

Ph. d.4. (C.) bd	01/28/2020	Construction of
the date of each amendment(s) ad date this document was signed.	option:	. It other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment)	file date)
Note: If the date inserted in this bl document's effective date on the De	ock does not meet the applicable statutory filing requartment of State's records.	uirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ado action was not required.	sted by the incorporators, or board of directors withou	it shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were sur	oted by the shareholders. The number of votes cast for ficient for approval.	or the amendment(s)
	oved by the shareholders through voting groups. The ach voting group entitled to vote separately on the ar	
"The number of votes cast i	or the amendment(s) was/were sufficient for approval	I
bv	(voting group)	
	(voting group)	
01/28/2020 Dated		
	EMANUEL DIETUICH ector, president or other officer - if directors or office	
selected	ector, president or other officer – if directors or office, by an incorporator – if in the hands of a receiver, tru d fiduciary by that fiduciary)	ers have not been stee, or other court
	DIEGO EMANUEL DIETRICH	
-	(Typed or printed name of person signing)	
	PRESIDENT	
-	(Title of person signing)	