P20000 31733

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TO: Amendment Section Division of Corporations

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NAME OF CORPORATION: AMERICAN DUMPING COSPOSATION
DOCUMENT NUMBER: P200000 31733
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Alejaudio Diaz
Name of Contact Person AMERICAN DUMPING COPPORATION Firm Company 10387 SW 136th Street #203
10387 SW 186th street #203
Miami FL 33157 City/ State and Zip Code
City/State and Zip Code Alejandro. J. Dinz @ Ndus. EDU
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Alexandro D'AZ ar 786, 816-7067
Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, F1, 323142415 N. Monroe Street, Suite 810Tallahassee, F1, 32303

Articles of Amendment to

Articles of Incorporation

American Dumpin	OC COSPOSA FION. as currently filed with the Florida Dept. of State)
(Name of Corporation :	as currently filed with the Florida Dept. of State)
P2000003	31733
(Document	(Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statistic Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp	oration:
	The new
name must be distinguishable and contain the word "corpo "Inc.," or Co." or the designation "Corp." "Inc.," o "chartered." "professional association," or the abbrevia	oration," "company," or "incorporated" or the abbreviation "Corp.," r "Co". A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRE</u>	ESS)
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)	10387 SW 186th street
	UN14-203
	Mism: FL 33157
D. If amending the registered agent and/or registered	
new registered agent and/or the new registered offi	ce address:
Name of New Registered Agent	
	(Florida street address)
	11 100 Aug St. Cl. augu 337
New Registered Office Address:	, Florida, Virginal (City) (Zip Code)
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I an	red Agent: n familiar with and accept the obligations of the position.
Signatur	e of New Registered Agent, if changing
	v e manutarinana

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:

 $P = President; V \cap Vice President; T = Treasurer; S \cap Secretary; D = Director; TR \cap Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer - If an officer director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.$

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	\underline{V}	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Vρ	Augelica M Diaz	2565 SW
Add			214 th LANE
Remove			MIAMI FL, 3318
2) Change			
Add			
Remove 3) Change		_	
Add			
Remove			···
4) Change			
Add			
Remove			
5) Change			-
Add			
Remove			
6) Change			
Add			
Remove			

	additional sheets	. if necessa	$\mu \nu j, = \ell$	s, enter chang Be specific)				_	
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an a	mendment provi	des for an	exchan	<u>ze, reclassific</u>	ttion, or cane	ellation of	issued sl	bares,	
_	sions for impleme f not applicable, is	enting the ndicate N :	<u>amendi</u> 1)	nent if not co	ntained in the	<u>amendme</u>	nt itself:		
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The date of each amendment(s) date this document was signed.	adoption:	· · · · · · · · · · · · · · · · · · ·	, if other than
Effective date if applicable:	April 29	th 2020	
	(no more than 90	days after amendment file date)	
Note: If the date inserted in this document's effective date on the I		ble statutory filing requirements.	this date will not be listed as
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
The amendment(s) was/were action was not required.	lopted by the incorporators, or be	ard of directors without sharehold	er action and shareholder
☐ The amendment(s) was/were ac by the shareholders was/were		number of votes east for the amend	iment(s)
☐ The amendment(s) was/were ap must be separately provided fo		igh voting groups. The following : ne separately on the amendments	
"The number of votes cus	st for the amendment(s) was/were	sufficient for approval	
by	(voting group)		
	(voting group)		
Dated A	afember D	<u>o</u> _	
Signature	alember D	· ~	
(By a) select	director, president or other office	r it directors or officers have not hands of a receiver, trustee, or other	
	Alexano	to DiAZ me of person signing)	
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	(Title of person sign	ing)	

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