P21000038902

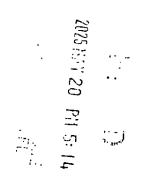
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COVER LETTER

. TO: Amendment Section
Division of Corporations

NAME OF CORPOR	ATION: D' BEST QUALIT	Y CONSULTANTS COR	PP
DOCUMENT NUMB	P21000038902		
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	oondence concerning this ma	tter to the following:	
1	RUBEN NAVARRO		
_		Name of Contact Person	1
-		Firm/ Company	
:	3740 NW 17ND TERR		
-		Address	
<u>i</u>	MIAMI GARDENS, FL 330		
		City/ State and Zip Code	e
ı	nartabmore@yahho.com		
-	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
RUBEN NAVARRO			768-8051
Name of	Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the 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)
Amer Divis P.O. 1	ng Address adment Section ion of Corporations Box 6327 nassee, FL 32314	Amend Divisio The Co 2415 Y	Address ment Section n of Corporations entre of Tallahassee V. Monroe Street, Suite 810 ussee, FL 32303

Articles of Amendment to Articles of Incorporation of

n'n	CCT	OTTAL	ITM	CONCLU	TASIC	CODE
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2025 MAY 20 PM 5: 14

(Name of Corporation as curren	itly filed with the Florida Dept. of State)
P21000038902	
(Document Number	of Corporation (1f known)
Pursuant to the provisions of section 607.1006. Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	The 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.	A professional corporation name must contain the word
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 ad new registered agent and/or the new registered office addre	
Name of New Registered Agent	
(Florida s	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Ager	nt:
I hereby accept the appointment as registered agent. I am familian	r with and accept the obligations of the position.
Signature of New	Registered Agent, if changing
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)

Example:

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.

X Change	<u>PT</u>	John Do	<u>oe</u>			
X Remove	<u>V</u>	Mike Jones				
X Add	<u>sv</u>	Sally Sn	nith			
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s		
1) Change	V		ELIZABETH NAVARRO	3740 NW 172ND TER		
X Add		_		MIAMI GARDENS, FL 33055		
Remove						
2) Change		_				
Add						
Remove 3) Change		_				
Add						
Remove						
4) Change		_				
Add						
Remove						
5) Change		_				
Add						
Remove						
6) Change						
Add						
Remove						

	additional Art , if necessary).	(Be specific	.)	-			
	9	(,				
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	-		-				
f an amendment provid	tes for an exch	iange, reclass	ification, or	cancellation of	of issued share	<u>es.</u>	
provisions for impleme (if not applicable, ir	nting the ame	nament 11 no	contained i	n tne amenui	nent itseit:		
(ij noi applicable, u							
							<u>-</u>
							
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	05/01/2025	•
The date of each amendment(s) adop	tion:	, if other than the
date this document was signed.		
05/01/2	025	
Effective date if applicable:	(no more than 90 days afte	e amandmant filu data)
	tho more man 30 days after	r amenament file date)
Note: If the date inserted in this bloc document's effective date on the Depart		ory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were adopte action was not required.	d by the incorporators, or board of di	rectors without shareholder action and shareholder
☐ The amendment(s) was/were adopte by the shareholders was/were suffice		f votes cast for the amendment(s)
☐ The amendment(s) was/were approx must be separately provided for each	red by the shareholders through voting have the voting group entitled to vote separate	
"The number of votes cast for	the amendment(s) was/were sufficien	nt for approval
by		.,
	(voting group)	
05/01/2025 Dated		
selected, h	president or other officer – if dire an incorporator – if in the hands of fiduciary by that fiduciary)	
RU	JBEN NAVARRO	
_	(Typed or printed name of pe	rson signing)
PR	ESIDENT	
-	(Title of person signing)	