P21000055897

| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| Special Instructions to Filing Officer: |
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COVER LETTER

TO: Amendment Section

P.O. Box 6327 Tallahassee, F1, 32314

| Division of Corporations |
|---|
| NAME OF CORPORATION: DIM OR RIVERA CLINIC INC |
| DOCUMENT NUMBER: <u>P3100055897</u> |
| The enclosed Articles of Amendment and fee are submitted for filing. |
| Please return all correspondence concerning this matter to the following: |
| Jeane of Contact Person |
| MJ Taxes and move inc |
| _ 2754 W. atlantic blud. |
| TOMPAND PLACE FL 33049 |
| E-mail address: (to be used for future annual report notification) |
| For further information concerning this matter, please call: |
| Jlanul Janul at July 209 - 5548 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: |
| \$35 Filing Fee |
| Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of Tallahassee |

2415 N. Monroe Street, Suite 810

Taliahassee, FL 32303

Articles of Amendment

to

| Article | les of Incorporation | |
|--|---|------------------------|
| Dilara Divara | of Ara O | |
| Name of Corporation as a | currently filed with the Florida Dept. of State) | |
| P 7 I N N N N S C | TO COLOR OF THE PROPERTY OF STREET | |
| (Document No | Sumber of Corporation (if known) | |
| | | |
| Pursuant to the provisions of section 607.1006, Florida Statutits Articles of Incorporation: | ites, this Florida Profit Corporation adopts the following amendmen | t(s) to |
| A. If amending name, enter the new name of the corpora | ation: | |
| Dilma Rivera | Cleaning Inc. The new | |
| name must be distinguishable and contain the word "corporal" | ntion," "company," or "incorporated" or the abbreviation "Corp.," "Co". A professional corporation name must contain the word | |
| "chartered," "professional association," or the abbreviation | in "P.A." | |
| B. Enter new principal office address, if applicable: | <u>_</u> | |
| (Principal office address <u>MUST BE A STREET ADDRESS</u> | <u>s</u>) | دید ده سرد محصرت په |
| | | : ويسي |
| | | ij |
| C. Enter new mailing address, if applicable: | مِ ب | - |
| (Mailing address <u>MAY BE A POST OFFICE BOX</u>) | | |
| | | |
| | | |
| D. If amending the registered agent and/or registered offi | fice address in Florida, enter the name of the | |
| new registered agent and/or the new registered office : | address: | |
| Name of New Registered Agent | | |
| | | |
| (Flo | lorida street address) | |
| New Registered Office Address: | , Florida | |
| | (City) (Zip Code) | |
| | | |
| New Registered Agent's Signature, if changing Registered | d Agent: | |
| I hereby accept the appointment as registered agent. I am fa | amiliar with and accept the obligations of the position. | |
| | | |
| | | |
| Signature of | f 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)

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>ΓΤ</u> | John De | <u>oe</u> | |
|-------------------------------|-----------|--------------|----------------------|---------|
| X Remove | <u>v</u> | Mike Jo | <u>o</u> nę <u>s</u> | |
| _X Add | <u>sv</u> | Sally S | <u>mith</u> | |
| Type of Action (Check One) | Title | | Name | Address |
| 1) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 2) Change | | _ | | |
| Add | | | | |
| Remove 3) Remove | | . | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | - | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | | | |
| Add | | | <u>-</u> | |
| Remove | | | | |

| ttach additional sheets, if necessary). | ticles, enter change(s) here: (Be specific) |
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| n amendment provides for an exch: | ange, reclassification, or cancellation of issued shares, |
| ovisions for implementing the amen | ndment if not contained in the amendment itself: |
| (if not applicable, indicate N/A) | |
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| The date of each amendment(s) ad- | option:, if other | r 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 blo document's effective date on the Dep | ock does not meet the applicable statutory filing requirements, this date will not be list artment of State's records. | ted as the |
| Adoption of Amendment(s) | (CHECK ONE) | |
| The amendment(s) was/were adoptaction was not required. | ted by the incorporators, or board of directors without shareholder action and shareholde | r |
| ☐ The amendment(s) was/were adop by the shareholders was/were suff | ted by the shareholders. The number of votes east for the amendment(s) icient for approval. | |
| ☐ The amendment(s) was/were appromust he separately provided for ea | oved by the shareholders through voting groups. The following statement ich voting group entitled to vote separately on the amendment(s): | |
| "The number of votes cast for | r the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | (voting group) | |
| Dated | 0/2021 | |
| Signature 8 | D. R.M | |
| (By a dire | ctor, president or other officer - if directors or officers have not been | |
| selected, l | by an incorporator – if in the hands of a receiver, trustee, or other court fiduciary by that fiduciary) | |
| up positive | County of the reduction of the county of the | |
| | Jantos Rivera Melendez | |
| | (Typed or printed name of person signing) | |
| _ | rielident | |
| | (Title of person signing) | |