P21000060802

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(only old to 2.p. note ")
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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07/12/21--81045--013 **35.00

2021 JUL 12 PM 2: 30

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION:	A CORPORATION			
DOCUMENT NUM	BER: P21000060802				
The enclosed Articles	of Amendment and fee are su	shmitted for filing.			
Please return all corre	spondence concerning this ma	itter to the following:			
	MARIA MARTINEZ				
	Name of Contact Person				
	TOTAL DHARMA CORPORATION				
		Firm/ Company			
	2926 SW 22nd CIR UNIT A				
		Address			
	DELRAY BEACH FL 33445	5			
	-	City/ State and Zip Cod	2		
	mafermc@gmail.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informatic	on concerning this matter, plea.		487-8717		
Name	of Contact Person	at (at () 487-8717 de & Daytime Telephone Number		
Enclosed is a check fo	or the following amount made				
S35 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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Street Address Amendment Section Division of Corporations The Course of Tallahaman			
	ahassee, FL 32314	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

TOTAL DHARMA COPORATION

(Name of Corporation as currently	filed with the Florida Dept. of State)
P21000060802	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.," 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 <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered office addr	ess in Florida, enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
The state of the s	
(Florida stre	vet address)
New Registered Office Address:	, Florida
	(City) (Ziprepule)
	-
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar w	
	T
	rgistered Agent, if changing
Signature of New Re	rgistered Agent, if changing

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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	\underline{V}	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	<u>Addreg</u> s	
1) Change	MGR	RAMON RODRIGUEZ	2926 SW 22nd CIR UNIT A	
X Add			DELRAY BEACH FL 33445	
Remove				
2)Change	MGR	JOSE RODRIGUEZ	2926 SW 22nd CIR UNIT A	
Add			DELRAY BEACH FL 33445	
X Remove 3) Change				
Add				
Remove				
4) Change				
Add			-	
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

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f an amendment p	rovides for an excl	hange, reclassific	ation, or cancella	tion of issued share	کے
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The date of each amendment(date this document was signed.	s) adoption:	, if other than the
-	07/01/2021	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements. Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sharehol	der action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes east for the americ sufficient for approval.	ndment(s)
The amendment(s) was/were must be separately provided	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment	statement (s):
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	,"	
	(voting group)	
07/01/2 Dated	021	
Signature	Maria Calrices	
sele	a director, president or other officer—if directors or officers have no ected, by an incorporator—If in the hands of a receiver, trustee, or off ointed fiduciary by that fiduciary)	
	MARIA CABRICES	
	(Typed or printed name of person signing)	
	MANAGER	
	(Title of person signing)	<u></u>

2021 JUL 12 PH 2: 30