## P21 0000 67608

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

ti tranco de donnos	ATION: DLRD CORP		
NAME OF CORPOR  DOCUMENT NUMB			
	f Amendment and fee are su	bmitted for filing.	
Please return all corresp	oondence concerning this ma	atter to the following:	
1	ANDREA DE LA ROSA		
_		Name of Contact Perso	n
-		Firm/ Company	
  -	5137 NW 7TH COURT		
		Address	<del></del>
; -	PEMBROKE PINES, FL 330	)28	
		City/ State and Zip Cod	e
,	ANDREA.1570@HOTMAIL	СОМ	
~	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
ANDREA DE LA ROS	A	954 at (	865-2233
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:
■ \$35 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)
Amer Divisi P O. 1	ng Address dment Section on of Corporations Box 6327 hassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

## Articles of Amendment to Articles of Incorporation of

FILED

DLRD CORP			2021 OCT 15 AM 8	). Fo
(Name	of Corporation as current	ly filed with the Florida	Dept. of State)	r <del>39</del>
P21000067608		•	TO SHARE OF ST	ATE
	(Document Number of	of Corporation (if known)		<del>,</del>
Pursuant to the provisions of section 607 its Articles of Incorporation:	'.1006, Florida Statutes, this	Florida Profit Corporatio	on adopts the following a	amendment(s) to
A. If amending name, enter the new n	ame of the corporation:			
name must be distinguishable and contain "Inc" or Co.," or the designation "chartered," "professional association,	Corp." "Inc." or "Co"	I professional corporation	ed" or the abbreviation	"he new "Corp.," the word
B. Enter new principal office address, (Principal office address MUST BE A S				
C. Enter new mailing address, if apple (Mailing address MAY BE A POST)  D. If amending the registered agent as	OFFICE BOX) nd/or registered office add	ress in Florida, enter the	name of the	
new registered agent and/or the ne	w registered office address	:		
Name of New Registered Agent	JOSE GRATEROL			
-	15137 NW 7TH COURT		, <u></u> ,	
	(Florida str	eet address)		
New Registered Office Address:	PEMBROKE PINES		33028	
the marting the marting.	<del></del>	(Cuy)	, Florida	le)
New Registered Agent's Signature, if of I hereby accept the appointment as regist	dered ageny. I am familiar v	sith and accept the obligate with and accept the obligate of t		
Check if applicable  The amendment(s) is/are being filed p	ursuant 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	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	P	ANDREA DE LA ROSA	15137 NW 7TH COURT
Add			PEMBROKE PINES, FL 33028
X Remove			15137 NW 7TH COURT
2) Change	P	JOSE GRATEROL	PEMBROKE PINES, FL 33028
X Add			
Remove 3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		-	
Add			
Remove			
6) Change			
Add			
Remove			

attach additional sheets, if necessary),	cles, enter change(s) here: (Be specific)		
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an amendment provides for an exch.	ange, reclassification, or c	ancellation of issued sh	ares,
rovisions for implementing the amer		the amendment usen:	
rovisions for implementing the amen (if not applicable, indicate N/A)	iomen ii not comaniesi m		
rovisions for implementing the amer	ament it not contained in		
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The date of each amendment(s) adoption:	, if other 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 block does not meet the applicable statutory filing requirements, this da document's effective date on the Department of State's records	te will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action was not required.	on and shareholder
☐ The amendment(s) was/were adopted by the shareholders — The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by Andrea De la Rox Anolola?. "  (voting group)	
(voing group)	
Dated 10/11/2021	
Signature Aut 1997	
(By a diee for, president or other officer - if directors or officers have not been	<del></del>
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	i
lace Co = = 1	
_ OSE GRATERIOL	
(Typed or printed name of person signing)	
YRESIDEDI	
(Title of person signing)	<del></del>

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