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SECRETARY OF STATE TALLAHASSEE. FL



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: D& D interstate C	<u>отр</u>			
DOCUMENT NUM	BER: P22000046591				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
	Juan D Martin				
		Name of Contact Person			
	D & D Interstate Corp				
	-	Firm/ Company			
	26780 SW 140 AVE # 110				
		Address	 		
		City/ State and Zip Code			
	NARANJA, FL 33032				
	E-mail address: (to be us	sed for future annual report n	otification)		
For further information	on concerning this matter, pleas	se call:		SECR TAL	2024 OCT 15 PM 4: 29
Juan D Martin		at (305	987-5337	LAY ATB	CT 1
Name	of Contact Person	Area Code	& Daytime Telephone Number	- SST	Ç
Enclosed is a check for	or the following amount made	payable to the Florida Depart	tment of State:	ECRETARY OF STAT	h Hd
■ \$35 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)	TATE	: 29
Am Div P.O	iling Address endment Section ision of Corporations Box 6327 lahassee, FL 32314	Division The Cer 2415 N.	ddress ent Section of Corporations atre of Tallahassee Monroe Street, Suite 810 see, FL 32303		

Articles of Amendment to Articles of Incorporation of

(Name of Corporation	on as currently filed with the Florida Dept. of St	nie)
D & D Interstate Corp		
(Docum	nent Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this Florida Profit Corporation adopts the	ne following amendment(s) to
A. If amending name, enter the new name of the co	orporation:	
D&D INTERSTATE COR!		The new
name must be distinguishable and contain the word "co "Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbre	or "Co". A professional corporation name m	abbreviation "Corp.,"
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u></u>	SECRETI
D. If amending the registered agent and/or register new registered agent and/or the new registered of		E &
Name of New Registered Agent		F7 29
Non Books and Office Address	(Florida street address)	
New Registered Office Address:	, Florio,	(Zip Code)
New Registered Agent's Signature, if changing Registered agent. I hereby accept the appointment as registered agent. Signa		? position.
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)

Remove

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 Jo	ones .			
X Add	<u>sv</u>	Sally St	<u>mith</u>			
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s		
1) Change						
Add						
Remove						
2)Change						
Add						
Remove 3) Change		_				
Add						
Remove					SEC SEC	
4) Change					£ 2 8	-
Add					TARY OF	
Remove					PH 4 OF S SEE,	C
5) Change		-				
Add					31.	
Remove						
6) Change		_				
Add						

E. If amending or adding additional Article	es, enter change(s) here:	
(Attach additional sheets, if necessary). ((Be specific)	
		
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		SECRETARY OF ST
		AR R TI
		59 3 =
F. If an amendment provides for an exchan	nge, reclassification, or cancellation of issued share	TARY CAHASS
provisions for implementing the amend	iment if not contained in the amendment itself:	Y SS
(if not applicable, indicate N/A)		SEE C
		: 2 FF
		<u> </u>
		

09/24/2024		
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 dat document's effective date on the Department of State's records.	e 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.	n and shan	eholder
☐ 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.	•)	
□ The amendment(s) was/were approved by the shareholders through voting groups. The following stateme must be separately provided for each voting group entitled to vote separately on the amendment(s):	nt	
"The number of votes cast for the amendment(s) was/were sufficient for approval		
by ¹ "		
(voting group)	SECI TA	2024 OCT 15
09/24/2024		s Th
Dated	CRETARY OF STATE	5
Signature		3 III
(By a director, president or other officer if directors or officers have not been selected, by an incorporator if in the hands of a receiver, trustee, or other court	E S	
appointed fiduciary by that fiduciary)	. بر <u>۱</u>	29
JUAN D MARTIN	ιή	
(Typed or printed name of person signing)		
PRESIDENT		
(Title of person signing)	-	