P23000084668

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SEGN TATASSEE, FL



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: _	DUPIN,	INC			
DOCUMENT NUMBER:	P23000084668				
The enclosed Articles of Amendme	ent and fee are su	bmitted for filing.			
Please return all correspondence co	oncerning this ma	tter to the following:			
		Richard Sierra			
	Name of Contact Person				
	FLORIDA SMALL BUSINESS LEGAL CENTER				
	Firm/ Company				
	6501 Congress Ave. #240				
Address					
	Boca Raton, FL 33487				
	City/ State and Zip Code				
	i	nfo@businesslawyer.biz			
E-mail:	address: (to be us	sed for future annual report	notification)		
For further information concerning	this matter, pleas	se call:			
Richard Sierra		at (
Name of Contact Pe	rson	Area Co	de & Daytime Telephone Number		
Enclosed is a check for the following	ng amount made	payable to the Florida Dep	artment of State:		
© .	'5 Filing Fee & icate 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)		
Mailing Address Amendment Sect Division of Corpo P.O. Box 6327 Tallahassee, FL 3	ion orations	Ameno Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810		

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILER

	DUPIN, INC	, ireD
(Name of Cor	rporation as currently filed with the Florida De P23000084668	pt. of State)
	P23000084668	SUCTOOL 23 PM 1:14
	(Document Number of Corporation (if known)	SECRETARY OF STATE TALLAHASSEE THE adopts the following amendment(s) to
Pursuant to the provisions of section 607.1006, its Articles of Incorporation:	Florida Statutes, this Florida Profit Corporation	adopts the following amendment(s) to
A. If amending name, enter the new name o	f the corporation:	
		The new
	ord "corporation," "company," or "incorporated " "Inc," or "Co". A professional corporation e abbreviation "P.A."	
B. Enter new principal office address, if app (Principal office address MUST BE A STREE		
		
	-	
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI		
		
		·
D. If amending the registered agent and/or in new registered agent and/or the new regi	registered office address in Florida, enter the na stered office address:	ame of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changi		
hereby accept the appointment as registered a	igent. I am familiar with and accept the obligation	ns 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> <u>J</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u> <u>s</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s	
1) X Change	PT.S.T	Pablo Dominguez, Executive Director	9000 Sheridan St. #138	
Add			Pembroke Pines, FL 33024	
Remove				
2) Change	<u>V</u>	Sebastian L Serri, Dir. of Operations	9000 Sheridan St. #138	
x Add			Pembroke Pines, FL 33024	
Remove Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Article (Attach additional sheets, if necessary).	es, enter change(s) here: (Be specific)		
Not Applicable			
	 _	· · · · · · · · · · · · · · · · · · ·	
	·		
			
F. If an amendment provides for an exchan provisions for implementing the amend (if not applicable, indicate N/A)	nge, reclassification, or ca ment if not contained in (ncellation of issued share the amendment itself:	<u>:S,</u>
Not Applicable			
			

. .

The date of each amendment(s) a	doption:	, if other than the
date this document was signed. Effective date if applicable:	July 1, 2024	
	(no more than 90 days after amend	ment file date)
Note: If the date inserted in this bedocument's effective date on the De		g requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors v	vithout shareholder action and shareholder
■ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes of flicient for approval.	east for the amendment(s)
	roved by the shareholders through voting groups each voting group entitled to vote separately on	
"The number of votes cast	for the amendment(s) was/were sufficient for app	proval
by		
	(voting group)	
	5/2024	
DatedSignature	Pablo Dominge	uz
(By a d	rector, president or other officer – if directors or I, by an incorporator – if in the hands of a receive ed fiduciary by that fiduciary)	officers have not been
	Pablo Dominguez	
	(Typed or printed name of person sign	ning)
	President and Executive Director	
	(Title of person signing)	