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## **COVER LETTER**

TO: Amendment Section

Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION: DOT Co	nscling; Inc.	
document number: $\underline{593000}$	:) 5 44 <b>/9</b>	
The enclosed Articles of Amendment and fee are sub	omitted for filing.	
Please return all correspondence concerning this mat	ter to the following:	
There	Name of Contact Person	-Sellinar
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E-mail address: (to be use	ed for future annual report no	tification)
For further information concerning this matter, pleaso	e call:	
Theresa Richarde Ja		624-3638
Name of Contact Person	Area Code	& Daytime Telephone Number
Enclosed is a check for the following amount made p	ayable to the Florida Departm	nent of State:
S35 Filing Fee S43.75 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## Articles of Amendment to Articles of Incorporation of

BDT CONSULTING, INC (Name of Corporation as currently filed with the Florida Dept. of State) P93000054419 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: Zip Codei New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations 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)

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> <u>John D</u>	<u>) oe</u>	
X Remove	<u>V</u> <u>Mike J</u>	<u>lones</u>	
X Add	<u>SV</u> <u>Sally S</u>	Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	V.P.	Kiernan Sullivan	620 E. 15 CT Panama City, 14. 3240
Add			Panama City, Ff. 3240
<u>₩</u> Remove	u 00	Vánielle Chirman	
2) <u>X'</u> Change	<u>V.P.S</u>	Vánicle Chizman	3/09 W. 22nd S-
Add			PC. 186.32401
Remove Change			
Add			
Remove			
4) Change			
Add			
Remove			<del></del>
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate NA1)		ling additional Art neets, if necessary).	(Be specific)				
provisions for implementing the amendment if not contained in the amendment itself:							
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(if not applicable, indicate N/A)	<u>t an amenoment p</u> provisions for imp	lementing the ame	nange, reciassing endment if not c	cation, or cance ontained in the	<u>llation of issued</u> amendment itse	<u>i shares,</u> ·lf:	
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The date of each amendment(s) adoption: $\frac{2}{10}$ if other than the date this document was signed.
Effective date if applicable:  L/O/LO LO  (no more than 90 days after amendment file date)
<b>Note:</b> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
☐ 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 statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval  by DPT Consulary, In - Negral Richards - Sulliven  (voting group)
Signature  (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 appointed fiduciary by that fiduciary)
Theres - Richards - Scillwar (Typed or printed name of person signing)
(Title of person signing)