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COVER LETTER

TO: Amendment Section Division of Corporations

AME OF CORPO	RATION: DRT International,	Inc.	<u></u> -
	BER:	<u>.</u>	
he enclosed Articles	of Amendment and fee are su	bmitted for filing.	
lease return all corre	spondence concerning this mat	tter to the following:	
	Desmond Falla		
		Name of Contact Persor	1
	DRT International, Inc.		
		Firm/ Company	
	1940 NW 82 Avenue,		
		Address	
	Doral FI 33126		
		City/ State and Zip Code	
dfalla	a@drt-int.com		
	E-mail address: (to be us	sed for future annual report	notification)
or further informatio	n concerning this matter, pleas	se call:	
Desmond Falla		305 at (888-3513
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check for	or the following amount made p	payable to the Florida Depa	irtment 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)
Mailing Address		Street	Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation

of

FILED

17 OCT 19 AM 10: 40

DRT International, Inc.

'SPORDIARY OR STREET

(Name of Corporation as	scurrently filed with the Florida Dept. of State)
P95000055965	
(Document N	Number of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statuts Articles of Incorporation:	tutes, this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corpor	ration:
N/A	The new
ame must he distinguishable and contain the word "co "Corp.," "Inc.," or Co.," or the designation "Corp," "h word "chartered," "professional association," or the abbre	orporation." "company," or "incorporated" of the abbreviation lnc," or "Co". A professional corporation name must contain the eviation "P.A."
Enter new principal office address, if applicable:	N/A
Principal office address <u>MUST BE A STREET ADDRES</u>	<u>SS</u>)
Enter new mailing address, if applicable:	N/A
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)	
D. If amending the registered agent and/or registered of	office address in Florida, onter the name of the
new registered agent and/or the new registered office	
Name of New Registered Agent N/A	
	Florida street address)
New Registered Office Address;	. Florida
New Registered Office Address.	(City) (Zip Code)
Sew Registered Agent's Signature, if changing Registere hereby accept the appointment as registered agent. I am	
nevery weeps the appointment as registered agent. I am	jaminar wan and accept the bongations of the position.
	1
Signature	of New Registered Agent, if changing

address of each Office Attach additional shee Please note the officer/ P = President; V= Vic Executive Officer; CFO held, President, Treasu Changes should be not	er and/or I its, if neces, director tit, e Presiden O = Chief rer, Direct ed in the for	Director be sary) le by the fit t: T= Trea Financial (or would bottoming may corporation	ring added: rst letter of the office title: surer; S= Secretary; D= Director; T Officer. If an officer/director holds n e PTD. canner. Currently John Doe is listed a. 1. Sally Smith is named the V and S. T	R= Trustee; C = Chairman or Clerk: CEO = Chief more than one title, list the first letter of each office is the PST and Mike Jones is listed as the V. There is these should be noted as John Doe, PT as a Change,
X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jor	<u>nes</u>	
X Add	<u>SV</u>	Sally Sm	<u>iith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	D		Marie Falla	F2911 S.W. 28TH COURT
Add				Miramar. FL 33027
X Remove				
2) Change	D	_	Digby Falla	12911 S.W. 28TH COURT
Add				Miramar, FL 33027
X Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
Character Character				ı
5) Change		-		-
Add				
Remove				
6) Change		_		
Add				
				I

_ Remove

If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
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	I
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 N/A)	
'A	
	<u>.</u>
	<u> </u>
	i

The date of each amendment(s) adoption:	$\underline{}$, if other than t
date this document was signed.	1
Effective date <u>if applicable</u> :	
(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 date value of state's records.	will not be listed as t
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ 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" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated	
Signature // esmon / the	
(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)	
Desmond Falla	
(Typed or printed name of person signing)	
CEO	
(Title of person signing)	