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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: DIGF Investment, Inc. DOCUMENT NUMBER: P95000072071					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Maria I. Ogra Name of Contact Person DIGF Investment, Inc Firm/ Company 2933 Maytin St. # 29 Address Orlando, FL. 32806 City/ State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Maria I. Ogra at (407) 415 - 2026 Name of Contact Person Area Code & Daytime Telephone Number					
\$35 Filing Fee					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle					

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation

of

DIGF Investmen	J. Inc.				
(<u>Name o</u>	f Corporation as currentl	y filed with the Florida Dept, of Sta	te)		
1F05 F000072071					
	(Document Number o	f Corporation (if known)			
Pursuant to the provisions of section 607.1 its Articles of Incorporation:	006, Florida Statutes, this	Florida Profit Corporation adopts the	: following ame	endment	(s) t
A. If amending name, enter the new na	me of the corporation:				
N/A			The	пен:	
name must be distinguishable and conto "Corp.," "Inc.," or Co.," or the designa- word "chartered," "professional associat	ution "Corp," "Inc," or "	Co". A professional corporation na	or the abbrev me must conta	iation in the	
B. Enter new principal office address, i (Principal office address MUST BE A \$T		N/A			
	,				
C. Enter new mailing address, if applie	rable:				
(Mailing address MAY BE A POST OFFICE BOX)		NIA			
				ب	
				2.5	
				(2)	[7]
 If amending the registered agent and new registered agent and/or the new 				- 5	
		-	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	<u> </u>	
Name of New Registered Agent	19/14			(A)	
	t Florido str	vet address)			
		,			
New Registered Office Address:		(City), Florida	(Zip Code)		
		,			
New Registered Agent's Signature, if ch I hereby accept the appointment as registe			position.		
	N/A				
	Signature of New R	egistered Agent, if changing			

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. President. President. President. President. President. President.

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</u>	<u>Doc</u>	
X Remove	<u>V</u> <u>Mike</u>	Jones	
X Add	SV Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	SCCT	Mayia I. Carale	2933 Martin St. Apt. 29
Add			Orlando, FL. 32806
X Remove			
2) Change	SCCT	Maria I. Ogna	2933 Martin St. Apt. 29 Orlando, FL. 32806
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			-

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
N/A	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
N/O	
10/1-1	

The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
Effective date if applicable: N/A	
(no more than 9t) days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will adocument's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
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 east for the amendment(s) was/were sufficient for approval	
hy	
(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 June 19, 2017	
Signature Slavia Polul France	
(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)	
Moria I. Ocara (Typed or printed name of person signing)	
(Typed or printed name of person signing)	<u> </u>
Secretary (l'itle of person signing)	
(little of person signing)	