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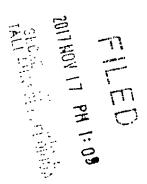
(Requestor's Name)
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I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Dorin Distributors.	INC.		
DOCUMENT NUMBI	P96000072993			
The enclosed Articles θ_j	Amendment and fee are su	binitted for filing.		
Please return all corresp	ondence concerning this mal	tter to the following:		
S	cott Vachon			
1	Dorin Distributors, Inc.	Name of Contact Person	1	
		Firm Company		
1038 Arlington St.				
(Flando, FL 32805	Address		
		City: State and Zip Cod		
E-mail address. (to be used for future annual report notification)				
For further information	concerning this matter, pleas	e call:		
Scott Vachon Name of	Contact Person	at (321 Area Co	377-8084)	
Enclosed is a check for the following amount made payable to the Florida Department of State:				
S35 Filing Fee	☐S43-75 Filling Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Cupy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Fallahassee, F1, 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

Articles of Amendment to Articles of Incorporation of

	Articles of A	
	to Articles of In	corporation
	ol	Con the C
orin Distributors, INC.		corporation (by filed with the Florida Dept. of State) of Corporation (if known)
(Name (of Corporation as current	ly filed with the Florida Dept. of State)
6000072993		The state of the s
	(Document Number of	of Corporation (if known)
rsuant to the provisions of section 607. Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts the following amendments to
If amending name, enter the new na	ime of the corporation:	
١		The new
	nation "Corp." * Inc. " or	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
Enter new principal office address,	if applicable:	1038 Arlington St
incipal office address <u>MUST BE A S</u>	TREET ADDRESS)	Orlando, F1, 32805
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1038 Arlington St
		Orlando, Fl. 32805
		fress in Florida, enter the name of the
	w registered office addres	<u>w.</u>
new registered agent and/or the new		
Name of New Registered Agent	Scott Vachon	
	Scott Vachon 1038 Arlington Street	
	1038 Arlington Street	rrect address)
	1038 Arlington Street	rger address) . Florida 32805

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:

tAttach 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	PT J <u>oh</u> n	Doe	
X Remove	∇ Mike	e lones	
X Add	S <u>Y</u> <u>Sally</u>	Smith	
Type of Action (Check One)	Tale	<u>Nam</u> e	<u>Addres</u> s
L) Change		Mitchell I. Dorin	6184 Buford Street
Add			Orlando, FL 32835
X Remove			
2) Change	Į,	Scott Vachon	1038 Arlington Street
N Add			Orlando, Fl. 32805
, _ Remove			
3.) Change			
Add			
Remove			
t) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
_ Add			
Remove			

F <u>If amending or</u> (Attach <i>addition</i>)	adding additional Art al sheets, if necessary).	icles, enter change (Be specific)	(s) here:			
N A						
						 -
						
						
						
						
_						
·			_ -			
						_
						
		<u> </u>				
E. If an assemble	at provides for an exc	hanna euslaviilisa	tian ar cancalle	ation of issuad sh	M Park	
provisions for	implementing the am	endment if not con	tained in the au	nendment itself:		
al not app	dicable, indicate Ned)					
N A						
						
-		·				
						
						- ·
·						

October 15, 2017	
The date of each amendment(s) adoption:	, if other than the
October 15, 2017	
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, the document's effective date on the Department of State's records.	his date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was were adopted by the shareholders. The number of votes east for the amend by the shareholders was were sufficient for approval.	ment(s)
☐ The amendment(s) was were approved by the shareholders through voting groups. The following s must be separately provided for each voting group entitled to vote separately on the amendments	tatement F
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was were adopted by the board of directors without shareholder action and shar action was not required.	eholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not (equired.	der
November 10, 2017 Dated Signature (By a director, presidency of ther officers of afrectors or officers base not selected, by an incorporator—if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	
Scott Vachon	
(Typed or printed name of person signing)	
President	
(Title of person signing)	-··