## P98000085746

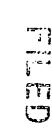
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORP	ORATION: DAVID T. CASE	RTA GOVERNMENT RE	LATIONS, INC.
	MBER: P98000085746	. <u>.</u>	
	<i>les of Amendment</i> and fee are st	abmitted for filing.	
Please return all co	rrespondence concerning this ma	itter to the following:	
	DAVID T CASERTA		
		Name of Contact Perso	on
	CASERTA & SPIRITI		
	-	Firm/ Company	
	7850 NW 146th St, Suite 508	\$	
		Address	
	MIAMI LAKES, FL 33016		
		City/ State and Zip Cod	de
	INFO@CSGFIRM.COM		
	E-mail address: (to be u	sed for future annual repor	t notification)
For further information DAVID T CASER	tion concerning this matter, plea		463-8808
Name of Contact Person		at (Area C	) 463-8808 ode & Daytime Telephone Number
	for the following amount made		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
A D P	lailing Address mendment Section division of Corporations O. Box 6327 allahassee, FL 32314	Amen Divisi The C 2415	Address diment Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 810

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## Articles of Amendment Articles of Incorporation of

DAVID T	L CASERTA	GOVERNMENT	RELATIONS,	INC

( <u>Name</u>	of Corporation as currently	y filed with the Florida De	pt. of State)	-
P98000085746				
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this a	Florida Profit Corporation	adopts the following amendme	ent(s) to
A. If amending name, enter the new n	ame of the corporation:			
			The new	i'
name must be distinguishable and contain "Inc.," or Co.," or the designation "Chartered," "professional association,"	${\it Corp}, {\it ``` 'Inc}, {\it `` or ``'Co''}, \ {\it A}$	company," or "incorporated   professional corporation	or the abbreviation "Corp" name must contain the word	I
B. Enter new principal office address,	if applicable:	7850 NW 146th St. Suite	508	
(Principal office address MUST BE A S		MIAMI LAKES, FL 330	16	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7850 NW 146th St, Suite	508	
•		MIAMI LAKES, FL 330	6	
D. If amending the registered agent at new registered agent and/or the ne			ame of the	
Name of New Registered Agent				
	7850 NW 146th St. Suite 5	08		
	(Florida stre	vet address)		
New Registered Office Address:	MIAMI LAKES		, Florida 33016	
		(City)	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist			ns of the position.	
		A nes.	2024 C	influe 6
· <del></del>	Signature of New Re	egistered Agent, if changing		4 1
Check if applicable  The amendment(s) is/are being filed p	oursuant to s. 607,0120 (11) (	e). F.S.	17 P	

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>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
<u>Evpe of Action</u> Check One)	<u>Title</u>	Name	Address
1) X Change	PD	DAVID T CASERTA	7850 NW 146th St, Suite 508
Add			MIAMI LAKES, FL 33016
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	<u> </u>
Add			
Remove			- SE 282
5) Change		<del>_</del>	
Add			
Remove			
			PH 3: 25 SEE, FL
			, H 2

Attach additional sheets, if necessary). (Be specific)	
<del></del>	
<del>-</del> .	
· · · · · · · · · · · · · · · · · · ·	
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)	
	<u> </u>
	. (3
	(2
	****
	(A)
	NSSEE, FL

•

The date of each amendment(s) adoption:late this document was signed.	, if other than the
Effective date <u>if applicable</u> :	re than 90 days after amendment file date)
(no mi	e man 90 days after amenament fue date)
<b>Note:</b> If the date inserted in this block does not meet locument's effective date on the Department of State's	he applicable statutory filing requirements, this date will not be listed as the ecords.
Adoption of Amendment(s) (CHECK O	<u>NE</u> )
The amendment(s) was/were adopted by the incorporaction was not required.	ators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for approval	
☐ The amendment(s) was/were approved by the sharehemust be separately provided for each voting group e	
"The number of votes cast for the amendment(s	) was/were sufficient for approval
by	
tvoting grou	
Dated 10/11/2024 Signature	A
(By a director, president or o	ther officer – if directors or officers have not been – if in the hands of a receiver, trustee, or other court iduciary)
David (Typed o	Printed name of person signing)
Preside	<del></del>
(Title of	person signing)

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