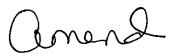
## P98000099366

| (Re                     | equestor's Name)   |             |  |  |
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| PICK-UP                 | ☐ WAIT             | MAIL        |  |  |
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| Certified Copies        | _ Certificates     | s of Status |  |  |
| Special Instructions to | Filing Officer:    |             |  |  |
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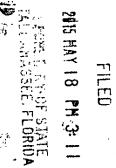
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BOR 5/20/15

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

| NAME OF CORPORATION: DLG Construction, Inc.  |  |  |  |  |  |
|--|--|--|--|--|--|
| DOCUMENT NUMBER: P98000 99366  |  |  |  |  |  |
| The enclosed Articles of Amendment and fee are sub   | omitted for filing.  |  |  |  |  |
| Please return all correspondence concerning this matt  | er to the following:   |  |  |  |  |
| Domenico LaGrasta  |  |  |  |  |  |
|  | Name of Contact Person   |  |  |  |  |
| DLG Construction, Inc.   |  |  |  |  |  |
|  | Firm/ Company  |  |  |  |  |
| 2338 Immokalee Road Ste 430  |  |  |  |  |  |
|  | Address  |  |  |  |  |
| Naples, Florida 34110  |  |  |  |  |  |
|  | City/ State and Zip Code   |  |  |  |  |
| christina@dmafboutique.com   |  |  |  |  |  |
|  | ed for future annual report notification)  |  |  |  |  |
| ·  | ·  |  |  |  |  |
| For further information concerning this matter, please   | e call:  |  |  |  |  |
| , Christina LaGrasta   | at (239 ) 269-1933  Area Code & Daytime Telephone Number   |  |  |  |  |
| Name of Contact Person   | Area Code & Daytime Telephone Number   |  |  |  |  |
| Enclosed is a check for the following amount made payable to the Florida Department 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 Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 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

FILED

DLG Construction, Inc.

(Name of Corporation as currently filed with the Florida Dept. of State) P98000099366 (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: n/a 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." 2338 Immokalee Road Ste 430 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Naples, Florida 34110 C. Enter new mailing address, if applicable: 2338 Immokalee Road Ste 430 (Mailing address MAY BE A POST OFFICE BOX) Naples, Florida 34110 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: (City) 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

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:<br>X Change          | <u>PT</u>    | John De     | <u>oe</u>         |                             |  |
|-------------------------------|--------------|-------------|-------------------|-----------------------------|--|
| X Remove                      | <u>v</u>     | Mike Jo     | <u>ones</u>       |                             |  |
| <u>X</u> Add                  | <u>sv</u>    | Sally Smith |                   |                             |  |
| Type of Action<br>(Check One) | <u>Title</u> |             | Name              | <u>Addres</u> s             |  |
| 1) X Change                   | P            |             | Domenico LaGrasta | 2338 Immokalee Road Ste 430 |  |
| Add                           |              |             |                   | Naples, Florida 34110       |  |
| Remove                        |              |             |                   |                             |  |
| 2) Change                     |              |             |                   |                             |  |
| Add                           |              |             |                   |                             |  |
| Remove                        |              |             |                   |                             |  |
| 3 ) Change                    |              | _           |                   |                             |  |
| Add                           |              |             |                   |                             |  |
| Remove                        |              |             |                   |                             |  |
| 4) Change                     |              | _           |                   |                             |  |
| Add                           |              |             |                   |                             |  |
| Remove                        |              |             |                   |                             |  |
| 5) Change                     |              |             |                   |                             |  |
| Add                           |              |             |                   |                             |  |
| Remove                        |              |             |                   |                             |  |
| 6) Change                     |              |             |                   |                             |  |
| Add                           |              |             |                   |                             |  |
| Pemove                        |              |             |                   |                             |  |

| E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific) |                       |                       |                      |              |
|---|-----------------------|-----------------------|----------------------|--------------|
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|   |                       |                       |                      |              |
| F. If an amendment provides for an  | exchange, reclassific | ation, or cancellatio | on of issued shares, |              |
| F. If an amendment provides for an provisions for implementing the (if not applicable, indicate N/2)                        | amenament if not col  | ntained in the amen   | oment itseir:        |              |
|   |                       |                       |                      |              |
|   |                       |                       |                      | -            |
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|   |                       |                       |                      |              |

| The date of each amendment(s) adoption:  | , if other than the                       |
|--|---|
| date this document was signed.   |   |
| Effective date <u>if applicable</u> :  |   |
| Effective date <u>if applicable</u> :  (no more than 90 days after amendment file da   | te)                                       |
| Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.                         | ents, this date will not be listed as the |
| Adoption of Amendment(s) ( <u>CHECK ONE</u> )  |   |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the arby the shareholders was/were sufficient for approval.  | mendment(s)                               |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amendment. | ving statement<br>nent(s):                |
| "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 action was not required.  | i shareholder                             |
| ■ The amendment(s) was/were adopted by the incorporators without shareholder action and sha action was not required.   | reholder                                  |
| 5/12/2015<br>Dated   |   |
| Signature(By a director, president or other officer – if directors or officers have  |   |
|  |   |
| selected, by an incorporator – if in the hands of a receiver, trustee, o appointed fiduciary by that fiduciary)  | r other court                             |
| Domenico LaGrasta  |   |
| (Typed or printed name of person signing)  | <del></del> _                             |
| P //   |   |
| (Title of person signing)  | <del></del>                               |