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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: THE D.J. SACHA CORP.

DOCUMENT NUMBER: P99000004761

The enclosed Articles of Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

HERBERT E. DEUSCHEL

Name of Contact Person

MARC E. O'CONNER, CPA, PA

Firm/ Company

9710 STIRLING ROAD, SUITE 107

Address

COOPER CITY, FL 33024

City/ State and Zip Code

HD@MEO-CPA.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 HERBERT E. DEUSCHEL
 at (305)
 546-1130

 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

Certificate of Status

S43.75 Filing Fee & Certified Copy (Additional copy is enclosed) S52.50 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

<u>Street Address</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Articles of Amendment to Articles of Incorporation of

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THE D. J. SACHA CORP.

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(<u>Name</u>	of Corporation as currently	filed with the Florida Dept. of S	State)
P99000004761			
	(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this I	Florida Profit Corporation adopts	the following amendment(s) to
A. <u>If amending name, enter the new n</u>	ame of the corporation:		
			The
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association."	Corp." "Inc." or "Co". A		
B. <u>Enter new principal office address</u> , (Principal office address <u>MUST BE A S</u>			
			20
			· .
C. <u>Enter new mailing address, if appl</u> (Mailing address <u>MAY BE A POST</u>			
(<u></u>		
D. If amending the registered agent an new registered agent and/or the new			r⊗ ithe ™
new registered agent and/or the ne	DEUSCHEL, HERBERT		
<u>Name of New Registered Agent</u>			
	9710 STIRLING ROAD. S		
	(Florida stre	et address)	
<u>New Registered Office Address</u> :	COOPER CITY	Flor	
	ł	(City)	(Zip Code)
	1 . N		
<u>New Registered Agent's Signature, if c</u> I hereby accept the appointment as regis.	tered agent. I am familiar w	ith and accept the obligations of t	he position.
		G	,
· <u>·····</u> ······························	dtm		<u></u>
	Signature of New He	gistered Agent, if changing	

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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:

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(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:

<u>X</u> Change	<u>PT</u>	John Doe	
<u>X</u> Remove	V	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
<u>Type of Action</u> (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	·		
Add			_ <u></u>
Remove			

f <mark>amending or adding additional</mark> Mtach <i>additional sheets, if necessa</i>	ry). (Be specific)				
······				<u> </u>	
			,	<u></u>	
					<u> </u>
		.=			
<u>f an amendment provides for an</u>	exchange, reclassi	fication, or cance	llation of issued sh	ares,	
provisions for implementing the	amendment if not	<u>contained in the</u>	amendment itself:		
(if not applicable, indicate N/	4)				
				.	~

The date of each amendment(s) adoption: ______, if other than the

date this document was signed.

Effective	date	if applicable:

(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 will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

- The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
- 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

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by ______(voting group)

AUGUST 26, 2020 Dated _____

Signature

(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)

SACHA DUBEARN

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(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)