PC6000123536

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone #	<i>f</i>)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	:)
(Do	cument Number)	
Certified Copies	_ Certificates o	of Status
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SECRETARY OF ALLAHASSEE, FLORDASSEE, FLOR

JUL 1 7 2018 S. YOUNG

COVER LETTER

TO: Amendment Section

Division of Corporations		
NAME OF CORPORATION: DAL DOCUMENT NUMBER: P0600		
The enclosed Articles of Amendment and fee are s	submitted for filing.	
Please return all correspondence concerning this m	atter to the following:	
368 Pin	Name of Contact Person Consult Firm/ Company Consult Address SPREY FL City/ State and Zip Code Verizon used for future annual report	ANT INC. E. Rd. - 34229
For further information concerning this matter, plea	ase call:	
Name of Contact Person Enclosed is a check for the following amount made	Area Co	de & Daytime Telephone Number
_	_	
\$35 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		Address ment Section

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment

to

Articles of Incorporation

of

DAL CONSU		<u> </u>		
		filed with the Florida De	:pt. of State)	
P06000				
. (D	ocument Number of	Corporation (if known)		
Pursuant to the provisions of section 607.1006, F its Articles of Incorporation:	lorida Statutes, this F	lorida Profit Corporation	adopts the following amendment	:(s) to
A. If amending name, enter the new name of t	he corporation:			
	NIA		The new	
name must be distinguishable and contain the	word "corporation	"- "company," or "incor	porated" or the abbreviation	
"Corp.," "Inc.," or Co.," or the designation "(word "chartered," "professional association," o	Corp," "Inc," or "C r the abbreviation "F	'o". A professional corpo '.A."	ration name must contain the	
	;	•	•	
B. Enter new principal office address, if applie (Principal office address MUST BE A STREET				
· · · · · · · · ·	ADDRESS)			
			SEE SEE	
		•	上 日 田	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE	C BAVI		基型 二 三、	
maning dearess may be a tost of Fich	<u>, buz</u>)		- Marie Mari	
			1 2 E	
			<u></u>	*
D. If amonding the registered areas and/ourse		t- 171	NA SO	
D. If amending the registered agent and/or registered agent and/or the new registered.	ered office address:	ss in Florida, enter the h	ime of the	
Name of New Registered Agent	N/A			
- The state of the				
	(Florida stree	i address)		
New Burkey J.O. 4.11		ŕ		
New Registered Office Address:		Lity)	_, Florida(Zip Code)	
		••	(,	
New Registered Agent's Signature, if changing				
I hereby accept the appointment as registered age	nt. I am familiar wi	th and accept the obligation	ns of the position.	
	Signature of New Reg	gistered 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 <math>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:		ny omian, or as an Aug.		
X Change	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		<u>Addres</u> s
1) Change	P	DAVID	LeBranc	368 PINE RANCH E. R.
Add Remove				OSPREY, FL 34229
2) Change	P	RENAE	LeBLANC	368 PINE RANCH E RO
Add				OSPREY, FL
3) Change		<u> </u>		
Add				
Remove				
4) Change	·	-		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

	(Be specific)
	NA
· · · · · · · · · · · · · · · · · · ·	N/H
	<u> </u>
	<u> </u>
n amendment provides for an excha	ange, reclassification, or cancellation of issued shares.
ovisions for implementing the amen-	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, and and an angular in the amendment itself:
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
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(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(if not applicable, indicate N/A)	ndment if not contained in the amendment itself:

The date of each amendment(s) adoption:	, if other than the
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 document's effective date on the Department of State's records.	I 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 cast for the amendment(s) was/were sufficient for approval	
by	
☐ 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_7-12-2018	
Signature (By a dijector, 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)	_
(Typed or printed name of person signing)	
(Title of person signing)	