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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	DNL Holdings, Inc.	· · ·	
DOCUMENT NUMBER:	· ·		
The enclosed Articles of Amendment	and fee are submitted for filing.		
Please return all correspondence conce	erning this matter to the following:		
	Barbara Perna		
	Name of Contact Person		
		-	
	Firm/ Company		
	•	•	
	3500 Whippoorwill Blvd.		
	Address		
	Punta Gorda, Fl., 33950		
	City/ State and Zip Code		
	b1.perna@comcast.net	-	
E-mail address:	(to be used for future annual report notification)		
		•	
For further information concerning this	s matter, please call:	*	
Barbara Perna	at ( 941 ) 268-7368		
Name of Contact Person	Area Code & Daytime Telephone Number	<del>-</del>	
Enclosed is a check for the following a	mount made payable to the Florida Department of State:		
□ \$35 Filing Fee □ \$43.75 Filing Fe	<i>1,</i> ~	Fce.	
Certificate of St	atus Certified Copy Certificate of	Status	
	(Additional copy is enclosed) Certified Cop	by Copy is enclosed)	
Mailing Address	Street Address -	·	
- Amendment Section	Amendment Section		
Division of Corporations	Division of Corporations		
P.O. Box 6327	Clifton Building		
Tallahassee, FL 32314	2661 Executive Center Circle	•	
	Tallahassee, FL 32301		

## to Articles of Incorporation of

FILED 2010 AUG-3 PM 3 54

DNL Holdings, inc.

(Name of Corporation as currently filed with the Florida Dept. of State) SECRETARY OF STATE

PALLAHASSEE, FLORIDA

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation:

me must be distinguishable and contain to breviation "Corp.," "Inc.," or Co.," or the me must contain the word "chartered," "proj	designation "Corp,"	" "Inc," or "Co". A professional
Enter new principal office address, if app		
rincipal office address <u>MUST BE A STREE</u>	TADDRESS)	
	<u></u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)		•
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new registered agent and/or the new regis		
new registered agent and/or the new regis  Name of New Registered Agent:	stered office Address	<b>E</b>
new registered agent and/or the new regis	stered office Address	treet address)
Name of New Registered Agent:	stered office Address	<b>E</b>

## 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)

<u>Title</u>	Name	Address	Type of Action	
preside	reside Dennis Deluca 3500 White Punta Gor		Add  Remove	
preside Barbara Perna  treasu Dennis Deluca		3500 Whippoorwill Blvd. Punta Gorda, Fl. 33950	☐ Add ☐ Remove ☐ Add ☐ Remove	
		3500 Whippoorwill Blvd. Punta Gorda, FI 33950		
	ng or adding additional Articles, enter		<del></del>	
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	ndment provides for an exchange, res s for implementing the amendment if			
	applicable, sindicate N/A)	+		
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· · · · · · · · · · · · · · · · · · ·			l In	

The date of each amendmen	t(s) adoption: July 30, 20	10	4. 16.	
Effective date if applicable:	July 30, 2010 (date of	adoption is requir		
	(no more thân 90 days afte	r amendment file d	date)	
Adoption of Amendment(s)	(CHECK ONI	<b>E</b> )	•	
The amendment(s) was/we by the shareholders was/w	ere adopted by the shareholde ere sufficient for approval.	ers. The number o	f votes cast for	the amendment(s)
	ere approved by the sharehold ed for each voting group enti			
"The number of votes	cast for the amendment(s) w	as/were sufficient	for approval	
. by		99		-
	(voting group)		* **	.*
action was not required.	ere adopted by the board of d			•
Dated July	30, 2010			•
Signature _	Lisa ill	Luca		
(By	y a director, president or othe ected, by an incorporator – if pointed fiduciary by that fidu	in the hands of a		
	<del> </del>	Lisa Deluca	**	
• . •	(Typed or print	ted name of persor	n signing)	-
	. <b>v</b>	ice President	•	
•	(Title of person sig		<del></del>	