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COVER LETTER

O: Amendment Section

Division of Corporations

LDL HOLDINGS INC TAME OF CORPORATION: The enclosed Articles of Amendment and fee are submitted for filing. lease return all correspondence concerning this matter to the following: LLYOD D LEHAN Name of Contact Person LDL HOLDINGS INC Firm/ Company 155 8TH AVE NE Address ST PETERSBURG FL 33701 City/ State and Zip Code DANNY.LEHAN@VILLAGEINN.COM E-mail address: (to be used for future annual report notification) further information concerning this matter, please call: OYD D LEHAN Area Code & Daytime Telephone Number Name of Contact Person closed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □S43.75 Filing Fee & S52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

LDL HOLDINGS INC	
(Name of Corporation aster	urrently filed with the Florida Dept. of State)
P11000049064	
(Document Nu	mber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statuttits Articles of Incorporation:	es, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporat	tion:
	The new
name must be distinguishable and contain the word "corporate "Inc.," or Co.," or the designation "Corp," "Inc," or "Inc," or "Inc," or the abbreviation "chartered," "professional association," or the abbreviation	ion." "company," or "incorporated" or the abbreviation "Corp.," Co". A professional corporation name must contain the word "P,A."
3. Enter new principal office address, if applicable:	
Principal office address MUST BE A STREET ADDRES)
'	<u> </u>
Enter new mailing address, if applicable:	-
(Mailing address MAY BE A POST OFFICE BOX)	(0,
, <u> </u>	
	Γ: ω
. If amending the registered agent and/or registered off new registered agent and/or the new registered office	ice address in Florida, enter the name of the address:
Name of New Registered Agent	<u> </u>
	lorida street address)
	, Florida
New Registered Office Address:	(City) (Zip Code)
w Registered Agent's Signature, if changing Registered tereby accept the appointment as registered agent. I am for	d Agent: Camiliar with and accept the obligations of the position.
Signature	of New Registered Agent, if changing
Jighulure	A 1/2 11 12 0 13 1 1 0 1 1 1 1 1 1 1 1 1 1 1 1 1 1

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and (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. 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. Example: X Change <u>PT</u> <u>John Doe</u> X Remove \underline{V} Mike Jones <u>X</u> Add \underline{SV} Sally Smith Type of Action <u>Title</u> Name (Check One) <u>Address</u> VC KIM T LEHAN ____ Change 909 BRUCE AVE __ Add CLEARWATER FL 33767 Remove PVTS LLOYD D LEHAN ___ Change 155 8TH AVE NE _ Add CLEARWATER FL 33701 ____ Remove ___ Change ____ Add ___ Remove ___ Change ___ Add __ Remove _ Change ___ Add __ Remove __ Change __ Add _ Remove

Page 2 of 4

mending or adding additional Articles, enter change(s) here ich additional sheets, if necessary). (Be specific)

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rovisions for implementing the amendment (if not applicable, indicate N/A)	1	
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	Page 3 of 4	
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ate of each amendment(s) adoption: DECEI	MBER 10, 2019	, if other than th
DECEMBER 10 20	19	
ive date if applicable:	more than 90 days after amendment file date	51

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 (voting group) 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. **DECEMBER 10, 2019** 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) LLOYD D LEHAN (Typed or printed name of person signing) **PRESIDENT** (Title of person signing)

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.