P16000066818

(Re	equestor's Name)	
(Ac	idress)	
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(ric	141033)	
(Ci	ty/State/Zip/Phone	#)
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☐ PICK-UP	MAIT	MAIL
(Ri	usiness Entity Nam	<u></u>
<i>(</i> 50)	ismess Emily Nam	ie)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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2022 OCT 28 PM 5: 23

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	ON:ON			
DOCUMENT NUMBER:	P16000066818			
The enclosed Articles of Amend	<i>ment</i> and fee are su	bmitted for filing.	•	
Please return all correspondence	concerning this ma	itter to the following:		
	OSCAR M NUNE	EZ		
		Name of Contact Person	1	
	ENTERPRISE IN	VESTMENT AND MORE	INC	
		Firm/ Company		
	11953 NAUTICA	DR		
		Address		
	ORLANDO, FL 3	2827		
 		City/ State and Zip Code	0	
	OSCARMEDICE	NCA@GMAIL.COM		
E-ma	il address: (to be us	sed for future annual report	notification)	
For further information concerni	ng this matter, plea	se call:		
OSCAR M NUNEZ		at (758-9601	
Name of Contact	Person	·	de & Daytime Telephone Number	
Enclosed is a check for the follow	wing amount made	payable to the Florida Depa	artment of State:	
-	3.75 Filing Fee & tificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Addr. Amendment Sc Division of Co P.O. Box 6327 Tallahassee, FI	rporations	Amend Divisio The Co 2415 N	Address ment Section of Corporations entre of Tallahassee N. Monroe Street, Suite 810	

Articles of Amendment to Articles of Incorporation of

FILED

ENTERPRISE INVESTMENT AND MORE INC

2022 OCT 28 PM 5: 23

	P16000066818	TALLALISEEPTAT
(Docume	ent Number of Corporation (if know	
Pursuant to the provisions of section 607.1006, Florida is Articles of Incorporation:	Statutes, this Florida Profit Corpo	ration adopts the following amendment(s)
a. If amending name, enter the new name of the con	rporation:	
N/A		The new
name must be distinguishable and contain the word "con Inc.," or Co.," or the designation "Corp," "Inc," "chartered," "professional association," or the abbrev	or "Co". A professional corpo-	orated" or the abbreviation "Corp.,"
Enter new principal office address, if applicable:	N/A	
Principal office address <u>MUST BE A STREET ADD</u>		
	<u> </u>	•
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	<u>N/A</u>	
		· · · · · · · · · · · · · · · · · · ·
. If amending the registered agent and/or registered new registered agent and/or the new registered o		the name of the
N/A		
Name of New Registered Agent		
	(Florida street address)	-
New Registered Office Address:		. Florida
New Registerea Office Address.	(City)	Zip Code)
		•
ew Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. I		bligations of the position
	an jamina and accepting of	and the position.
Signal	ture of New Registered Agent, if ch	anging

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:

(Attach additional sheets, if necessary)

Example:

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.

X Change	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	4
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	VP	NUNEZ, DIOGENES R	11953 NAUTICA DR
Add			ORLANDO, FL 32827
Remove 2) Change	VP	LA FORGIA, GIAMBATTISTA	11953 NAUTICA DR
X Add			ORLANDO, FL 32827
Remove 3) Change		_	
Add			
Remove 4) Change			•
Add			
Remove 5) Change			
Add	-		
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary). (Be specific)	
N/A	
	
	
	
. If an amendment provides for an exchange, reclassification, or cancellation of issued shape	ares,
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
N/A	

•.	10/24/2022	
The date of each amendment(s) a date this document was signed.	doption:	, if other than the
10/2 Effective date <u>if applicable</u> :	24/2022	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bedocument's effective date on the De	block does not meet the applicable statutory filing requirement epartment of State's records.	s, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were ad- action was not required.	opted by the incorporators, or board of directors without shareho	older action and shareholder
☐ The amendment(s) was/were ad- by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amoufficient for approval.	endment(s)
	proved by the shareholders through voting groups. The following each voting group entitled to vote separately on the amendmen	
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
10/24/2022 Dated		
selecte	irector, provident or other officer – if directors or officers have r d, by an incorporator – if in the hands of a receiver, trustee, or o ted fiduciary by that fiduciary)	not been ther court
	OSCAR M NUNEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	•