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(Req	uestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR		nterphise Grandon Gran	up. Inc.
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
·	2110 A Miami	Name of Contact Person Firm/ Company W Jand A Jaddress Te 33 City/ State and Zip Cod Outlock Code Gor future annual report	Grap, Inc. Venue
For further information	e-mail address: (to be us		notification)
<u>Daniel</u> Name o	Chie f Contact Person	at (786 Area Co	bde & Daytime Telephone Number
Enclosed is a check for	the following amount made		
\$35 Filing Fee	□\$43.75 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)
<u>Mail</u>	ing Address	Street	Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation

of ・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・
Dir Enterprise Grap, Inc. 2019 SET 21 EN CILO
(Name of Corporation as currently filed with the Florida Dept. of State)
P18000095872
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
The new
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable:
(Principal office address <u>MUST BE A STREET ADDRESS</u>)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:
Name of New Registered Agent Daniel Chae
5085 NW 1H Head (#1507) (Florida street address)
New Registered Office Address: Mlami Florida 33116 (City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Joen aml
Signature of New Registered 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 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: X Change	<u>PT</u> <u>Joh</u>	hn Doe	
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	<u>SV</u> <u>Sal</u>	lly Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
i)X Change	Ps	Daniel Choe	5085 NM 1th Heet (#1507)
Add			MIAMI, FC 33116
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			···
Remove			
6) Change			
Add			
Remove			

	rets, if necessary). (B	enter change(s) here: 'e specific)		
				
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<u>an amenament pr</u> rovisions for imp	<u>ovides for an exchang</u> ementing the amendu	e, reclassification, or ca tent if not contained in t	<u>ncellation of issued :</u> he amendment itself	shares,
(if not applicab	le, indicate N/A)	ient ii not contained in t	ne unchantent itsen	<u> </u>
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			<u> </u>	
				
				
		-X) [7]		
		- A/A-		
		- N/13-		

The date of each amendment(s) adoption:	, if other than the
C_{-} \cdot	
Effective date if applicable: Sphenher G, 2019 no more than 90 days after amendment file date	re)
Note: If the date inserted in this block does not meet the applicable statutory filing requireme document's effective date on the Department of State's records.	nts, this date will 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 arby the shareholders was/were sufficient for approval.	nendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amendm	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and action was not required.	shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and sharaction was not required.	eholder
Dated 9 2019	
Signature	• h
selected, by an incorporator – if in the hands of a receiver, trustee, or	
appointed fiduciary by that fiduciary)	
Daniel Chie	
(Typed or printed name of person signing)	
Maria A	
(Title of person signing)	
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