P19000040515

(Requestor's Name)	_
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(City/State/Zip/Phone #)	_
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PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	-
Certified Copies Certificates of Status	
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Special Instructions to Filing Officer:	1
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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 14, 2021

DANH LUONG 17228 BERMUDA VILLAGE DR BOCA RATON, FL 33487

SUBJECT: DL & MV INC Ref. Number: P19000040515

We have received your document for DL & MV INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a PROFIT SOCIAL BENEFIT CORPORATION, but your entity is a PROFIT CORPORATION. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Catherine M Brumbley Regulatory Specialist II

www.sunbiz.org

DO DOV coop m H I DI II

Letter Number: 321A00025005

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: DL & MV INC		
DOCUMENT NUME			
The enclosed Articles	of Amendment and fee are sul	bmitted for filing.	
Please return all corres	spondence concerning this mat	tter to the following:	
	Danh Luong		
		Name of Contact Persor	
	DL & MV INC	-	
	· · · · · · · · · · · · · · · · · · ·	Firm/ Company	-
	17228 Bermuda Village Dr		
		Address	
	Boca Raton, FL 33487		
		City/ State and Zip Code	:
	danhcluong@gmail.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Tor tartier informatio	ir concerning this matter, preas	cuii.	
Danh Luong		at (404	578-7720 de & Daytime Telephone Number
Name (of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□S43.75 Filing Fee & Certificate of Status	☐S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio The Co	Address Iment Section In of Corporations In of Tallahassee I. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment

Articles of Incorporation of	
DI long M	
(Name of Corporation as currently filed with the Florida Dept. of State)	
(Document Number of Corporation (if known)	AII
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amend its Articles of Incorporation:	lment(s) to
A. If amending name, enter the new name of the corporation:	
The n	1ew
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 wa "chartered," "professional association," or the abbreviation "P.A."	ord
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	_
	-
	_
C. Enter new mailing address, if applicable:	_L.
(Mailing address MAY BE A POST OFFICE BOX)	_5 { *********
	1
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	Ø.
(Florida street address)	
New Registered Office Address: , Florida (Zip Code)	_
(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.	
Signature of New Registered Agent, if changing	
Check if applicable	

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 Do	<u>e</u>	
X Remove	\underline{V}	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	V.T	_	MY VO	17228 Bermuda Village Dr
Add				Boca Raton, FL 33487
X Remove				
2) Change		_		
Add				
Remove Change		_		
Add				
Remove				
4) Change		_		-
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
, Add		_		
Remove				

tuen tittimona. Di	ling additional Artic neets, if necessary).	(Be specific)				
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an amendment	provi <mark>des for an exc</mark> t	iange, reclassific	atjon, or cancell:	tion of issued sh	rares,	
provisions for im	plementing the ame	ndment if not co	ntained in the ar	<u>nendment itselt;</u>		
(if not applied	ible, indicate N/A)					
						
					_	
						
<u> </u>						
						-

The date of each amendment(s) adopt date this document was signed.	tion:	, 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 document's effective date on the Depart	does not meet the applicable statutory filing requirements ment of State's records.	, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopted action was not required.	d by the incorporators, or board of directors without shareho	lder action and shareholder
The amendment(s) was/were adopted by the shareholders was/were suffic	d by the shareholders. The number of votes east for the ame ient for approval.	ndment(s)
☐ The amendment(s) was/were approv must be separately provided for eac	ed by the shareholders through voting groups. The following h voting group entitled to vote separately on the amendment	g statement (s):
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by	(voting group)	
DatedOV	2,2021	
selected, by	tor, president or other officer – it directors or officers have n y an incorporator – if in the hands of a receiver, trustee, or o fiduciary by that fiduciary)	ot been ther court
_	Onh Luong (Typed or printed name of person signing)	
	Pre sident (Title of person signing)	