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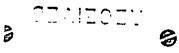


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COVER LETTER

TO: Amendment Section **Division of Corporations**

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NAME OF CORP	ORATION: D&L IT SERVICE	ES INC.	
DOCUMENT NU	P23000067833		
The enclosed Artic	les of Amendment and fee are su	bmitted for filing.	
Please return all co	rrespondence concerning this ma	atter to the following:	
	David McBride		
		Name of Contact Person)
	D&L IT Services Inc.		
	*	Firm/ Company	
	7663 Rolling Hills Dr.		
		Address	
	Jacksonville, FL 32221		
		City/ State and Zip Cod	e
	mebridebizness@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informa	tion concerning this matter, plea	se call:	
David McBride		414 at (de & Daytime Telephone Number
Nan	ne of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:
S35 Filing Fee	■\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
7 1 F	Aailing Address Amendment Section Division of Corporations O. Box 6327 Callahassee, FL 32314	Ameno Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

(Name of Companyation of augres)		
-	ntly filed with the Florida Dept. of Sta	<u>ate</u>)
P23000067833		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, the Articles of Incorporation:	is <i>Florida Profit Corporation</i> adopts th	e following amendment(s)
A. If amending name, enter the new name of the corporation:		
December Duc DLMI Schurce	Inc.	The new
name must be distinguishable and contain the word "corporation," Inc.," or Co.," or the designation "Corp," "Inc," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name m	ubbreviation "Corp.," ust contain the word
, ,	7663 Rolling Hills Dr.	
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)		
	Jacksonville, FL 32221	
	Jacksonvine, 1 E 52221	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	6625 Argyle Forest Blvd.	<u>~</u>
	Suite 4 PMB 5034	
		
	Jacksonville, FL 32244-6126	
If amending the registered agent and/or registered office ac new registered agent and/or the new registered office addre	Idress in Florida, enter the name of the	ne
	Idress in Florida, enter the name of the	<u>ne</u>
new registered agent and/or the new registered office address Name of New Registered Agent	Idress in Florida, enter the name of the sess:	ne
new registered agent and/or the new registered office address Name of New Registered Agent	Idress in Florida, enter the name of the	<u>ne</u>
new registered agent and/or the new registered office address Name of New Registered Agent	Idress in Florida, enter the name of the sess:	

Check if applicable

The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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)

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>	John Do	<u>oe</u>	
X Remove	$\underline{\mathbf{V}}$	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	<u>Addres</u> s
1) Change				
Add				
Remove				
2) Change		· -		
Add				
Remove 3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_	L-T-C	
Add				
Remove				

	ding or adding additional Audditional sheets, if necessary)). (Be specific)			
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If an an	nendment provides for an ex	change, reclassific	<u>ation, or cancellati</u>	on of issued shares,	
	ions for implementing the an not applicable, indicate N/A)	nendment if not co	ntained in the ame	ndment itself:	
<u>provisi</u>	noi applicame, maicale wa)				
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The date of each amendment(s) adoption date this document was signed.	:, if other than t
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this block document's effective date on the Departm	res not meet the applicable statutory filing requirements, this date will not be listed as to not of State's records.
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adopted b action was not required.	the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient	the shareholders. The number of votes cast for the amendment(s) for approval.
	by the shareholders through voting groups. The following statement of the group entitled to vote separately on the amendment(s):
"The number of votes east for the	amendment(s) was/were sufficient for approval
by	
	(voting group)
selected, by a	president or other officer – if directors or officers have not been incorporator – if in the hands of a receiver, trustee, or other court ciary by that fiduciary)
	J McBride
	(Typed or printed name of person signing)
CEO	
	(Title of person signing)

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