P24000001056

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SECRETARY OF STATE
TALLAHASSEE, FL

6 WB 8- AGN 15

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: CHISHLOM ENT	ERPRISES, INC.			
DOCUMENT NUMI	D24000001056			· -	
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this ma	tter to the following:			
	MICHAEL D. CHISHOLM				
		Name of Contact Person	<u> </u>		
	CHISHLOM ENTERPRISES	S, INC.			
		Firm/ Company	····		
	14228 SPANISH WELLS DI	₹.			
		Address			
	HUDSON, FL 34667				
		City/ State and Zip Code	e		
	mchisholmjr@icloud.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further informatio	n concerning this matter, plea	se call:			
MICHAEL D. CHISE	IOLM	at (<u>727</u>	277-7707		
Name of Contact Person		Area Co	de & Daytime Telephone Nu	mber	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	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)	CHORES	
Mailing Address		Street Address 5		美龙	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

CHISHLOM ENTERPRISES INC.

	of Corporation as currently	filed with the Florida Do	ept, of State)	
P2400001056	(D)	0 / // // // /		
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006. Florida Statutes, this F	lorida Profit Corporation	adopts the following	amendment(s) to
A. If amending name, enter the new n	ame of the corporation:			
CHISHOLM ENTERPRISES, INC.			5	The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Catartered," "professional association."	Corp," "Inc," or "Co". A		l" or the abbreviation	"Corp"
B. Enter new principal office address, (Principal office address MUST BE A S				<u>_</u>
C. Enter new mailing address, if appl (Mailing address MAY BE A POST				
				
D. If amending the registered agent ar new registered agent and/or the ne		ss in Florida, enter the n	ame of the	
Name of New Registered Agent	MICHAEL D. CHISHOLM			
	14228 SPANISH WELLS D	PR.		
	(Florida stre	et address)		
New Registered Office Address:	HUDSON		, Florida 34667	
		City)	(Zip Co	de)
New Registered Agent's Signature, if c I hereby accept the appointment as regist Check if applicable	tered agent. Lam.familiar w	ith and accept the obligation of the obligation	24.14. 78.14.14.	2024 HOV -8 AH 9:
☐ The amendment(s) is/are being filed p	ursuant to s. 607.0120 (11) (c	e), F.S.	-TAT	 ယ

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.

X Change	PT Jol	hn Doe		
X Remove	<u>V</u> <u>Mi</u>	ike Jones		
X Add	<u>SV</u> <u>Şa</u>	ally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	PRES	MICHAEL D. CHISHHLOM	14228 SPANISH WELLS DR.	
Add			HUDSON, FL 34667	
X Remove				
2) Change	PRES	MICHAEL D. CHISHOLM	14228 SPANISH WELLS DR.	
X Add			HUDSON, FL 34667	
Remove 3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change			202k	
Add				
Remove			522 & Prov.	
			AH 9: CF STA	
			LEE 31	

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)	
-		
		
		-
		
 		
If an amendment provides for an exe provisions for implementing the am	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	
(if not applicable, indicate N/A)		
		· · · · · · · · · · · · · · · · · · ·
		2024 I
		2024 NOV
		2024 NOV +8
		S. 9
		3024 100Y +8 AM 9: 31 3000 TIANNY OF STATE TALLAHAS SEE, FL

	JUNE 5, 2024	
The date of each amendment date this document was signed		, if other than the
Effective date if applicable:	JUNE 5, 2024	
	(no more than 90 days after amendment file date)	·
	this block does not meet the applicable statutory filing requirements, the Department of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/we action was not required.	re adopted by the incorporators, or board of directors without shareholder	action and shareholder
	re adopted by the shareholders. The number of votes east for the amendrere sufficient for approval.	nent(s)
	re approved by the shareholders through voting groups. The following stand for each voting group entitled to vote separately on the amendment(s):	
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
Dated	6/5/2024	
Signature	mh	
	y a director, president or other officer – if directors or officers have not be rected, by an incorporator – if in the hands of a receiver, trustee, or other oppointed fiduciary by that fiduciary)	
	MICHAEL D. CHISHOLM	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	

2024 NOV -8 AM 9: 31