## P97000042759

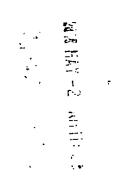
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**Division of Corporations** PROMMEL ENTERPRISES INCORPORATED NAME OF CORPORATION: P97000042759 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MARILYN PROMMEL Name of Contact Person PROMMEL ENTERPRISES INCORPORATED Firm/ Company PO BOX 137 Address ODENVILLE ALABAMA 35120 City/ State and Zip Code marilyn@zenadesign.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ( 970 ) 663-3972

Area Code & Daytime Telephone Number MARILYN PROMMEL Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee ■\$43.75 Filing Fee & **□\$**43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address

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

**TO:** Amendment Section

Amendment Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

(Name o	f Corporation	n as currently fil	led with the Florida Dept. of St	ate) `(
ROMMEL ENTERPRISES INCORPO	DRATED	P97000042759		· 5
	(Docume	ent Number of Co	orporation (if known)	*
ursuant to the provisions of section 607.  Articles of Incorporation:	1006, Florida	Statutes, this <i>Floa</i>	rida Profit Corporation adopts th	ne following amendme
. If amending name, enter the new na	me of the cor	poration:		
ENA AVIAN MITIGATION PRODU	JCTS INCOR	PORATED		The new
ame must be distinguishable and cont Corp.," "Inc.," or Co.," or the design ord "chartered," "professional associal	ation "Corp."	" "Inc," or "Co"	". A professional corporation n	or the abbreviation or the must contain the
Enter new principal office address, i		-	N/A	
Principal office address <u>MUST BE A ST</u>	TREET ADDI	<u>RESS</u> )		
		<del>-</del>		<del></del>
		-		
. Enter new mailing address, if applications	cable:		/ .	
(Mailing address MAY BE A POST (		) _	NA	
			/	
		-		
		-		
. If amending the registered agent an	d/or registere	d office address	in Florida, enter the name of t	<u>he</u>
. If amending the registered agent annew registered agent and/or the new			in Florida, enter the name of t	<u>he</u>
new registered agent and/or the new			in Florida, enter the name of the	<u>he</u>
	v registered o		in Florida, enter the name of t	<u>he</u>
new registered agent and/or the new	v registered o	ffice address:		<u>he</u>
new registered agent and/or the new	v registered o			<u>he</u>
new registered agent and/or the new	v registered o	ffice address:	uddress), Floria	

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 <math>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: <u>X</u> Change	<u>PT</u>	John De	<u>oe</u>	,	
X Remove	<u>v</u>	Mike Jo	ones	NA	
X Add	<u>sv</u>	Sally Si	<u>mith</u>	/ / \	
Type of Action (Check One)	Title		<u>Name</u>		<u>Addres</u> s
1) Change				<del></del> _	
Add					
Remove					
2) Change					
Add		_		<del></del>	
Remove					
3) Change		_			
Add					
Remove					
4) Change		_		<del></del>	
Add					
Remove					
5) Change					
Add					
Remove					
6) Change		<del></del>			
Add					
Remove					

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rovisions for impl	menting the amendment	eclassification, or cancell t if not contained in the ar	nendment itself:	
(if not applicable		/A		
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The date of each amendment(s) date this document was signed.	adoption:, if other than the
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	( <u>CHECK ONE</u> )
☐ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):
	ast for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder
30th Dated	April 2019
(By sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court binted fiduciary by that fiduciary)
	Gary Allen Prommel
	(Typed or printed name of person signing)
	President / CEO
	(Title of person signing)