P990001366

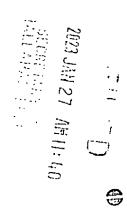
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COVER LETTER

TO: Amendment Section Division of Corporations

DHL ENTE NAME OF CORPORATION:	RPRISES, INC.
P99000011366 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fe	e are submitted for filing.
Please return all correspondence concerning	this matter to the following:
James L. Chase	
Chase & Ralls, PLC	Name of Contact Person
	Firm/ Company
101 East Government	· ·
Pensacola, Florida 32:	Address 502
	City/ State and Zip Code
jchase@chaseattorney	
The state of the s	to be used for future annual report notification)
E-man address: (to be used for future annual report notification)
For further information concerning this matt	or please call
To further information concerning this mate	er, piease can.
James L. Chase	850 434-3601 at ()
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amoun	nt made payable to the Florida Department of State:
\$35 Filing Fee \$43.75 Filing Certificate of S	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address 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	(1) - m (D)
	of	• /)
DHL ENTERPRISES, INC.		2023 JAN 27 AM II
(Name	of Corporation as currently filed with the Flori	
DHL ENTERPRISES, INC.		MELANATA A
	(Document Number of Corporation (if know	
its Articles of Incorporation: A. If amending name, enter the new n	.1006, Florida Statutes, this <i>Florida Profit Corpor</i> ame of the corporation:	
		The new
	nthe word "corporation," "company," or "incorp Torp," "Inc," or "Co". A professional corpor For the abbreviation "P.A."	orated" or the abbreviation "Corp.,"
B. Enter new principal office address,	if applicable:	

projessional ansvertining or the tool c	
B. Enter new principal office address, if applicable (Principal office address MUST BE A STREET ADD	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>X</u>)
D. If amending the registered agent and/or register new registered agent and/or the new registered Name of New Registered Agent	office address:
New Registered Office Address:	(Florida street address)

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

(City)

(Zip Code)

Check if applicable

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

E. If amending	g or adding additional Art	ticles, enter change(s) here:	
	tional sheets, if necessary).	(Be specific)	
N/A			
	·····		
			
*******		· · · · · · · · · · · · · · · · · · ·	·
			· • • · · · · · · · · · · · · · · · · ·
F. If an ameno	dment provides for an exc	change, reclassification, or cancellation of issued shares,	
provisions	for implementing the am	endment if not contained in the amendment itself:	
(if not	applicable, indicate N/A)		
N/A			
· · ·			
	· · · · · · · · · · · · · · · · · · ·		

.

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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action	<u>Title</u>	<u>Name</u>	Address
(Check One)	P	JAMES K. LABBIE	3763 Highway 90
i) Change		_	Pace, Florida 32570
Add			3763 Highway 90
Remove	P	WADIH EL KHOURY	Pace, Florida 32570
2) Change X			
Add			
Remove Change			
Add			
Remove			
4) Change			****
Add			12-12-1
Remove			
5) Change	·		
Add			
Remove			
റ Change			
Add			
Remove			
ACHIOYC			

The date of each amendment(s) ac	option:, if other than t
date this document was signed.	
Effective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)
Note: If the date inserted in this be document's effective date on the De	ock does not meet the applicable statutory filing requirements, this date will not be listed as to partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast	for the amendment(s) was/were sufficient for approval
by	(voting group)
•	(voting group)
Dated √ / / / Signature	123/23
selected appoint	rector, president or other officer — if directors or officers have not been I. by/an incorporator — if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary) James L. Chase
	(Typed or printed name of person signing) Registered Agent
	(Title of person signing)