316475

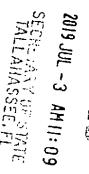
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



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06/03/19--01020--023 **43.75



JUL - 3 2019 C Kinse,



June 19, 2019

STEFANIE RENEE KIRKER 5560 STATE RD 16 SAINT AUGUSTINE, FL 32092

SUBJECT: PACETTI FARMS INC

Ref. Number: 316475

We have received your document for PACETTI FARMS INC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

If the corporation is a **PROFIT** corporation it must be signed by a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary.

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 Wood Regulatory Specialist II

Letter Number: 819A00012257

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	ATION: Pacetti Farms Inc.		12.7
DOCUMENT NUMB	ER: 316475		
	of Amendment and fee are su	bmitted for filing.	
Please return all corresp	pondence concerning this mat	eter to the following:	
:	Stefanie Renee Kirker		
-		Name of Contact Persor	1
1	Pacetti Farms Inc.		
-		Firm/ Company	
:	5560 State Road 16		
-		Address	
;	Saint Augustine, FL. 32092		
-		City/ State and Zip Code	2
.1::. 0*	700@wahaa aam		
aigns.	790@yahoo.com	sed for future annual report	notification)
	e-man address. (to be as	sed for future annual report	nomication)
For further information	concerning this matter, pleas	se call:	
Renee Kirker		at (_) 669-2254
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:
☐ S35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Ame Divis	ting Address ndment Section sion of Corporations Box 6327	Amend Divisio	Address Iment Section on of Corporations Building

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation of

Pacetti	fains To
(Name of Corporation as currently	filed with the Florida Dept. of State)
· ·	4/01/75
(Document Number of	Corporation (if known)
	•
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
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 "Coword "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:	2019 2019
(Mailing address MAY BE A POST OFFICE BOX)	
<u></u>	A
	SSC → 133
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ss in Florida, enter the name of the
new registered agent and/or the new registered office address.	· · · · · · · · · · · · · · · · · · ·
Name of New Registered Agent	
(Florida stre	et address)
Now Parintened Office Address	Maria.
New Registered Office Address:	, Florida City) (Zip Code)
	•
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Re	gistered Agent, if changing

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 Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	S	Renee Kirker	5820 State Road 16
X Add			Saint Augustine, FL
Remove			32092
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary).	cles, enter change(s) he	<u>:re</u> :		
N/A	(De apacigne)			
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	12.7 1			
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F. If an amendment provides for an exch	ange, reclassification, o	or cancellation of iss	ued shares,	
provisions for implementing the ame (if not applicable, indicate N/A)	adment if not contained	l in the amendment	<u>itself:</u>	
DV) Ai				
IN/A		·		
IV/A		·		
IV/A	<u>-</u>			
IV/A				
N/A				
IV/A				

. · · · · ·	N/A	
The date of each amendment(s) ad date this document was signed.	option:	, if other than t
N/A		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blocument's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this datastrment of State's records.	te will not be listed as t
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were ado by the sharcholders was/were sur	sted by the shareholders. The number of votes cast for the amendment(sficient for approval.	·)
	oved by the shareholders through voting groups. The following stateme ach voting group entitled to vote separately on the amendment(s):	nt
"The number of votes cast i	or the amendment(s) was/were sufficient for approval	
by N/A	••	
• • • • • • • • • • • • • • • • • • • •	(voting group)	
action was not required.	ted by the board of directors without shareholder action and shareholde	г
·		
May 29,201 Dated)	
Signature (By a di	ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other cound fiduciary by that fiduciary)	t
	Renec Kirker	
	ecretary (Typed or printed name of person signing) (Title of person signing)	