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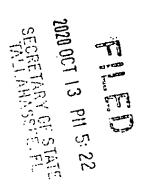
(Req	uestor's Name)	
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(City	/State/Zip/Phone	e #)
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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: Paca dis- Pact of Large INC
DOCUMENT NUMBER: NO 40000 3575
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
(Name of Contact Person)
Paradisa Park (Firm/Company)
(Firm/ Company)
7111 142 ne Ave LUT # 90 (Address)
LARRO, CLA 3377'
(City/ State and Zip Code)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
(Name of Contact Person) at 737 24 3660 (Area Code) (Daytime Telephone Number)
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
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 (Additional copy is enclosed) ☐ \$52.50 Filing Fee Certificate of Status (Certified Copy (Additional Copy is Enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303

Articles of Amendment

FILED

Articles of Incorporation

~····	of		2020 OCT 13	PM 5: 22
Harrordise Harris of	Larce.	Tre.	\$505571.0V	
(Name of Corporation as currently filed with the Florid	la Dept. of-State)		TALL AHAS	OF STATE
PARACISE PART OF LA	Q. S. m	e # 1	J Ch/00000 35	70EE.FE
	mber of Corporation		0 42/0000 33	, ,
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	itutes, this <i>Florida</i>	Not For Profit	Corporation adopts th	e following
A. If amending name, enter the new name of the corpo	ration:			
				The new
name must be distinguishable and contain the word "corp. "Company" or "Co." may not be used in the name.	oration" or "incor _i	porated" or the	abbreviation "Corp."	or "Inc."
B. Enter new principal office address, if applicable:				
(Principal office address MUST BE A STREET ADDRE	<u>SS</u>)			
				_
C. Patanana and Standard Standards.				
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)				
		-		
				_
D. If amonding the angletoned arount and/on assistanced	office address in E	Navida amtau th	a same of the	
D. If amending the registered agent and/or registered onew registered agent and/or the new registered officers.		iorida, enter in	ie name or the	
N. CH. D				
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·			
New Registered Office Address:		(Florida stree	t address)	
new neglistered Office radicess.				
			, Florida	
	(City)		(Zip Code)	
New Registered Agent's Signature, if changing Registe				
I hereby accept the appointment as registered agent. I an	1 familiar with and	accept the oblig	gations of the position	

Signature of New Registered 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 X Remove X Add	PT John D V Mike J SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change Add	<u>P</u> _	Gary Himm	7111 142 Re 1074 95
Remove 2) Change Add	<u>JP.</u>	JUND FOLEY	THE MONEY AND LUTH 43
Remove 3) Change Add Remove	Su	Dobaire Doelfeen	3377) 7111 143 no Ave MT# 59 App y Fre 33771
4) Change Add	TR	FLUMEUGE WALTERS	LODGE ELT LOTH 90
Remove 5)	VP	Hillary CARNEY	39771 7111 142 NO DIC LOTAS
	(Mem Aere AT LANS.	BOTTY SHARP	33771 7111 14270 AVE LUTIZ
E. If amending or additional she		icles, enter change(s) here: (Be specific)	<u>33771</u>

Note: If the date inserted in this bloc document's effective date on the Dep	ck does not meet the applicable statutory filing requirements, this date will not be listed a partment of State's records.	s the
Enecuve date il applicable:	(no more than 90 days after amendment file date)	
date this document was signed. Effective date if applicable:		
The date of each amendment(s) ad	loption:, if other	thar
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re are no members or members entitled to vote on the amendment(s). The amendment(s) was/were oted by the board of directors.
Dated
Signature Signature Celler
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
(Typed or printed name of person signing)
Title of person signing)