N1500000004203

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SECRETARY OF STATE OF STATE OF CORPORATION

Amend CC 5 (10, 5/15/15

COVER LETTER

TO: Amendment Section Division of Corporations

PECAXX, INC. NAME OF CORPORATION:	
NEGUEGO4203 DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are such	united for filing.
Please return all correspondence concerning this man	ter to the following:
L JOSEPH SCHMOKE	
	(Name of Contact Person)
PACAXX, INC	
	(Firm/ Company)
3651 FAU BLVD, STE 400-EE4	
	(Address)
BOCA RATON FL 33431-6489	
	(City/ State and Zip Code)
TSC HMOKE@BELLSOUTH.NET	
E-mail address: (to be use	ed for future annual report notification)
further information concerning this matter, please	e call:
10 SEPH SCHMOKE	561 289-4102
(Name of Contact Person	
Enclosed is a check for the following amount made p	nayable to the Florida Department of State:
☐ \$35 Filing Fee ☐\$43.75 Filing Fee & Certificate of Status	Certified Copy (Additional copy is enclosed) \$52:50 Filing Fee & Certificate of Status Certified Copy (Additional Copy is Enclosed)

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

Street Address
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

PECAXX INC

OIVISION OF RYSD 2015 MAY 1 AM 11: 44

PE	CAXX, INC.	
(Name of Corporation as curren	tly filed with the Florid	la Dept. of State)
N15	5000004203	
(Document Numb	er of Corporation (if lone	rwn)
Pursuant to the provisions of section 617.1006, Florida Statute mendment(s) to its Articles of Incorporation:	es, this <i>Florida Not For</i> I	Profit Corporation adopts the followin
L. If amending name, enter the new name of the corporati		
name must be distinguishable and contain the word "corpora	N/A	The ner
name must be distinguishable and contain the word "corporal "Company" or "Co." may not be used in the name.	tion" or "incorporated"	or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	N	A
Principal office address <u>MUST BE A STREET ADDRESS</u>)	
C. Enter new mailing address, if applicable:		/
(Mailing address MAY BE A POST OFFICE BOX)	N/	Α
	1	•
). If amending the registered agent and/or registered office	ce address in Florida, e	nter the name of the
new registered agent and/or the new registered office a		
Name of New Registered Agent:	N/	A
	/	
	(Flor	ida street address)
New Registered Office Address:		
		, Florida
	(City)	Florida (Zip Code)
New Registered Agent's Signature, if changing Registered	Agent	
hereby accept the appointment as registered agent. I am fai		ne obligations 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 carporation, 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	PT John De		1 .	_
X Remove	V Mike Jo	ones	112 /	
_ Add	SV Sally St	<u>mith</u>	1111	
of Action	<u>Title</u>	Name		Address
theck One)				
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Change				
		 		
Add				
Remove				
2) Change				
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Remove				
6) Change				
Change				
Add				
Aud				
Dames				
Remove				

If amending or adding additional Articles, enter change(s) here: (attach additional sheets, if necessary). (Be specific)

RTICLE III (replace wording in the Article with the following)
THE CORPORATE PURPOSE IS TO PROVIDE FREE OR LOW COST TESTING, ADVICE AND GUIDANCE
TO UNDERPRIVELEGED, MINORITY, OR FIRST-GENERATION INDIVIDUALS OF ALL AGES SO THAT THEY
CAN CONSIDER CAREERS AND EDUCATIONAL PATHS LIKELY TO PROVIDE THEM WITH AN OPPORTUNITY
TO FULFILL THEIR POTENTIAL WITHIN THEIR OWN AND THE BROADER COMMUNITY. THE CORPORATE
PURPOSE SHALL AT ALL TIMES BE GUIDED BY THE RULES PROHIBITING OR RESTRICTING ACTIVITIES AS
DESCRIBED NOW OR IN THE FUTURE BY SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE.
ARTICLE IX (new)
Distribution of Assets Upon Dissolution
UPON THE DISSOLUTION OF THIS CORPORATION, ASSETS SHALL BE DISTRIBUTED FOR ONE OR MORE
PURPOSES WITHIN THE MEANING OF SECTION 501(C)(3) OF THE INTERNAL REVENUE CODE, OR
CORRESPONDING SECTION OF ANY FUTURE FEDERAL TAX CODE, OR SHALL BE DISTRIBUTED
O THE FEDERAL GOVERNMENT, OR TO A STATE OR LOCAL GOVERNMENT, FOR A PUBLIC PURPOSE.
,

The date of each am	endment(s) adoption:	, if other than the
date this document w	· / · / · · · · · · · · · · · · · · · ·	
Effective date if app		
	(no more these 90 days after amendment file date)	
	rted in this block does not meet the applicable statutory filing requirements, this date will not date on the Department of State's records.	be listed as the
Adoption of Amenda	neut(s) (CHECK-ONE)	
The amendments	(s) was/were adopted by the members and the number of votes cast for the amendment(s) ent for approval.	
	mbers or members entitled to vote on the amendment(s). The amendment(s) was/week- word of directors.	
Dated	May 6, 2015	
Signatur		,
	(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 fichiciary by that fiduciary)	
	LJOSEPH SCHMOKE	
	(Typed or printed name of person signing)	
	PRESIDENT, DIRECTOR	
	(Title of person signing)	