P04000139492

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name)	
(D	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	
		İ
1	Office Use Only	



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800265535398 10/20/14--01029--010 **35.00



10/31/14

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: PBK POC	DL SERVICES, INC
DOCUMENT NUMBER:	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this n	natter to the following:
HECTOR M BR	AVO
-0-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	Name of Contact Person
PBK POOL SEF	RVICES, INC
W-1/3-7 (188)	Firm/ Company
1485 NW 153 A	VE
	Address
PEMBROKE PI	NES, FL 33028
	City/ State and Zip Code
BRAVEUGEN1822	@YAHOO.COM
	used for future annual report notification)
For further information concerning this matter, ple	rase call:
HECTOR M BRAVO	at (305) 2위 - 1860
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount mad	e payable to the Florida Department of State:
■ \$35 Filing Fee	
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

FILED

Ρ	B	K	Ρ	O	OL	SERVICES	, INC
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2014 OCT 20 PM 4: 33

(Name of Corporation as currently filed with the Florida Dept. of State)

P04000139492

SECRETARY CRISTATE MAILAHASSEE, FLORIDA

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to

N/A	
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp," word "chartered." "professional association." or the al	"corporation," "company," or "incorporated" or the "Inc," or "Co". A professional corporation name mubreviation "P.A."
B. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDR</u>	N/A
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered new registered agent and/or the new registered of Name of New Registered Agent N/A	
NI/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.

Example: X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	AS		JULIO C EUGENIO	1485 NW 153 AVE
√ ∧dd				PEMBROKE PINES
Remove				FL 33028
2) Change		<u></u>		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
Characa				
6) Change		_		
Add				
Remove				

- (Attac	ch additional sheets, if necessary). (Be specific)
N/A	
 	
7. Ifan	amendment provides for an exchange, reclassification, or cancellation of issued shares,
pro	visions for implementing the amendment if not contained in the amendment itself:
N/A	(if not applicable, indicate N/A)
14/74	

The date of each amendment(s) a	adoption: 10/13/2014	, if other than the
date this document was signed.	•	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were ad action was not required.	lopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were ac action was not required.	dopted by the incorporators without shareholder action and shareholder	
Dated	10-13-14	
Signature	A Rouge	
select	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)	
	HECTOR M BRAVO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	