Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000251859 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

Fax Number : (850)617-6380

From:

Account Name : SHANE M. SMITH, P.A.

Account Number : 120140000004

: (321)724-1919 : (321)723-8218

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. Email Address:

COR AMND/RESTATE/CORRECT OR O/D RESIGN PDC ENTERPRISES, INC.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

Help

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State) P04000143755 (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) its Articles of Incorporation: A. If amending pame, enter the new name of the corporation: The new 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 "Co". A professional corporation name must contain the word "chartered." "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MAYBEA POST OFFICE BOX) C. Enter new malling address, if applicable: (Malling address MAYBEA POST OFFICE BOX) PALM BAY, FL 32907 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered address: Name of New Registered Agent 939 MINA AVE NE (Florida street address) PALM BAY Florida 32907	i	PDC ENTERPRIS	ES, INC.			
(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) its Articles of Incorporation: A. If amending pame, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new malling address MAYBEA POST OFFICE BOX) PALM BAY, FL 32907 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered affice address: Name of New Registered Agent 939 MINA AVE NE (Florida street address) PALM BAY Florida 32907	(Name of Corporation a		orida Dept. of State)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) its Articles of Incorporation: A. Hamending pame, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.", A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailling address MAY BE A POST OFFICE BOX) PALM BAY, FL 32907 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent 939 MINA AVE NE (Florida street address) PALM BAY Florida 32907		P04000143755				
its Articles of Incorporation: A. If amending pame, enter the new name of the corporation: The new 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 "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new malling address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) PALM BAY, FL 32907 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered affice address: Name of New Registered Agent 939 MINA AVE NE (Florida street address) PALM BAY Florida 32907	(Docume	ent Number of Corporation (if	known)			
The new 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 "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new malling address, if applicable: (Malling address MAYBEA POST OFFICE BOX) PALM BAY, FL 32907 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered affice address: Name of New Registered Agent 939 MINA AVE NE (Florida street address) PALM BAY PALM BAY Florida 32907		'.1006, Florida Statutes, this F	Clorida Profit Corporation adopts the fol	lowing ame	ndment(s) to
name must be distinguishable and contain the word "corporation." "company." or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered." "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new malling address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) PALM BAY, FL 32907 D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered affice address: Name of New Registered Agent 939 MINA AVE NE (Florida street address) PALM BAY Florida 32907	A. If amending name, enter the new n	ame of the corporation:				
C. Enter new malling address, if applicable: (Malling address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent 939 MINA AVE NE (Florida street address) PALM BAY Florida PALM BAY Florida 720 730 740 750 760 760 760 760 760 760 76	"Corp.," "Inc.," or Co.," or the design	nation "Corp," "Inc," or "C	o". A professional corporation name i	the abbrevi	iation	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent 939 MINA AVE NE (Florida street address) PALM BAY PALM BAY Florida 32907						
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent 939 MINA AVE NE (Florida street address) PALM BAY PALM BAY Florida 32907					14	
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent 939 MINA AVE NE (Florida street address) PALM BAY Florida 32907			939 MINA AVE NE	(- m)		
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent 939 MINA AVE NE (Florida street address) New Registered Office Address: PALM BAY Florida 32907	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<u></u>	PALM BAY, FL 32907			<u> </u>
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent 939 MINA AVE NE (Florida street address) PALM BAY Florida 32907					I	-
Name of New Registered Agent 939 MINA AVE NE (Florida street address) New Registered Office Address: PALM BAY Florida 32907			ss in Florida, enter the name of the			
939 MINA AVE NE (Florida street address) PALM BAY Florida 32907	Name of New Registered Agent			11.7	24	
New Registered Office Address: PALM BAY , Florida 32907			· <u>-</u>			
New Registered Office Address: TALIVI DAI , Florida 32907		•	· · · · · · · · · · · · · · · · · · ·			
(Cltv) (Zip Code)	New Registered Office Address:	(Clry)	Florida 32907	<u></u>		

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

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	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	: Jones	
_X Add	<u>SV</u> <u>Sally</u>	Smith	
Type of Action (Check One)	Title	Name	Address
1) Change		DESIREE COLAIACOMO	939 MINA AVE NE
Add	/		PALM BAY, FL 32907
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
		·	
6) Change		·	
Add			
Remove			

). (Be specific)		
·			
			
			·
			
<u> </u>	<u> </u>		
	<u></u>		
			_
			<u></u>
	·		
	•		
			
	<u> </u>		
	change reclassification o	r cancellation of Issued sh	ares
in amendment provides for an ex-	CHAIRE, I CCIA STITEMENT C		
rovisions for implementing the au	<u>nendment if not contained</u>	in the amendment itself:	
nn amendment provides for an exceptions for implementing the auditor (if not applicable, indicate N/A)	<u>nendment if not contained</u>	in the amendment itself:	
rovisions for implementing the au	<u>nendment if not contained</u>	i in the amendment itself:	
rovisions for implementing the au	<u>nendment if not contained</u>	in the amendment itself:	
rovisions for implementing the au	<u>nendment if not contained</u>	in the amendment itself:	
rovisions for implementing the au	<u>nendment if not contained</u>	in the amendment itself:	
rovisions for implementing the au	<u>nendment if not contained</u>	in the amendment itself:	
rovisions for implementing the au	<u>nendment if not contained</u>	in the amendment itself:	
an amendment provides for an ex- rovisions for implementing the au (if not applicable, indicate N/A)	<u>nendment if not contained</u>	in the amendment itself:	
rovisions for implementing the au (if not applicable, indicate N/A)	<u>nendment if not contained</u>	in the amendment itself:	

The date of each amendment(s) adoption: OCTOBER 28, 2014	_, if other than the
date this document was signed.	
Effective date if applicable: OCTOBER 28, 2014.	_
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for 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	-
(voling group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated OCTOBER 28, 2014	
Signature PUD COL ~	_
(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)	
PHILIP M. COLAIACOMO, JR.	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	