## POS000058478

(Re	questor's Name)	
(Ad	dress)	
	<del>,</del>	
(Ad	dress)	
(Cit	y/State/Zip/Phone	:#)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nam	ne)
(Do	cument Number)	
Certified Coples	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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U-M/23/UK--01008--014 \*\*35.00

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: PEYFORMA	nce Distributi	ng Inc
DOCUMENT NUMBER: P05000	58478	
The enclosed Articles of Amendment and fee are s	ubmitted for filing.	
Please return all correspondence concerning this m		
Jane (Name of Co	COPE	<del></del> .
Performance (Firm)		
995Z NE	HWY 24 dress)	<del></del>
(3.3, 2.23)	<u>C</u> 32618	
For further information concerning this matter, ple	ase can.	
(Name of Contact Person)	at ( 352 ) 486 · . (Area Code & Daytime Telep	2858 phone Number)
Enclosed is a check for the following amount:		
□\$35 Filing Fee □\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & 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

PERFORMANCE	DISTRIBUTING	Inc
		,

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

(Document number of corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Condopts the following amendment(s) to its Articles of Incorporation:  NEW CORPORATE NAME (if changing):	HAR 23 PM
Must contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," A professional corporation must contain the word "chartered", "professional association," or the abbrevi	
MENDMENTS ADOPTED- (OTHER THAN NAME CHANGE) Indicate Article nd/or Article Title(s) being amended, added or deleted: (BE SPECIFIC)	Number(s)
add as object shawholder the name Michael S. COP	
9952 NE HWY 24, Archer, FL	32618
	<del></del>
(Attach additional pages if necessary)	<del></del>
f an amendment provides for exchange, reclassification, or cancellation of issued share for implementing the amendment if not contained in the amendment itself: (if not applicable)	• •
	<del></del>

(continued)

The date of each amendment(s) adoption:O//O//O/
Effective date if applicable: 01/01/00
(no more than 90 days after amendment file date)
Adoption of Amendment(s) (CHECK ONE)
The amendment(s) was/were approved 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
(voting 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.
Signature  (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)
Michael S. COPE  (Typed or printed name of person signing)
OFFICER (Title of person signing)
(Title of person signing)

FILING FEE: \$35