# P85000 58/33

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone #)	
PICK-UP	WAIT MAIL	
(Bu	usiness Entity Name)	
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions to	Filing Officer:	

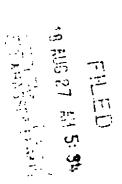




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### **COVER LETTER**

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: PAC C			
DOCUMENT NUMBER: P050001	58133		
The enclosed Articles of Amendment and fee are sul	bmitted for filing.		
Please return all correspondence concerning this mat	tter to the following:		
Danielle	Johnston		
	Name of Contact Person	ı	
PAC	COMM. THE.		
	Firm/ Company		
2900 NW 3	Address		
Miani, F	City/ State and Zip Code		
	City/ State and Zip Code	:	
Office a Paccon E-mail address: (to be us	ed for future annual report	notification)	
For further information concerning this matter, pleas	se call:		
Danielle Johnston	at (305		
Name of Contact Person	Area Coo	de & Daytime Telephone Number	
Enclosed is a check for the following amount made p	payable to the Florida Depa	rtment of State:	
\$35 Filing Fee \$\text{Certificate of Status}\$	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address	Street	Address	
Amendment Section	Amendment Section		
Division of Corporations	Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314		Building xecutive Center Circle	

Tallahassee, FL 32301

#### Articles of Amendment

## to Articles of Incorporation

of

PAC COMM	INC.
	as currently filed with the Florida Dept. of State)
P05000	Ø158133
	t Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Stits Articles of Incorporation:	tatutes, this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corp.	oration:
	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc," or "Co". A professional corporation name must contain the breviation "P.A."
B. Enter new principal office address, if applicable:	N/A
(Principal office address <u>MUST BE A STREET ADDRI</u>	ESS )
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	M/A
	<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 off	
Name of New Registered Agent N/A	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Designatured Agentic Cignothure if changing Design	torod Aganti
New Registered Agent's Signature, if changing Registe I hereby accept the appointment as registered agent. I a	nm familiar with and accept the obligations of the position.
Signatu	ure 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.

Frample:

X Change	PT John I	Doe	
X Remove	V Mike	Jones	
X Add	<u>SV</u> <u>Sally</u>	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	Secretary	Elizabeth Penade	2900 NW 39 th St.
Add			Miani, FC 33142
X Remove			
2) Change	secretary	Donicile Johnston	
X Add			Miani, FL 33142
Remove			
3) Change			
Add			
Remove			<del></del>
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. <u>If ame</u> (Attach	ending or adding additional Article a additional sheets, if necessary). (	s, enter change(s) here Be specific)	:	
	N/A			
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F. <u>If an a</u>	amendment provides for an exchar isions for implementing the amend	ige, reclassification, or	cancellation of issued sha n the amendment itself:	ires,
<u>51041</u>	if not applicable, indicate N/A)	ment it not contained i	the amenament resent.	
	N/A			
			<del></del>	
<del></del>	··· <del>····</del>	<del></del>		
		<del></del>	<del></del>	
<u> </u>				

The date of each amendment(s) adoption:	, if other than the
late this document was signed.	
Effective date if applicable: 8/23/18	
Effective date if applicable: 8/23/18  (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendmen by the shareholders was/were sufficient for approval.	t(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following states must be separately provided for each voting group entitled to vote separately on the amendment(s):	ment
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by"  (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and sharehold action was not required.	der
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 8/22/18 Signature	
(By a director, president or other officer – if directors or officers have not bee	n .
selected, by an incorporator – if in the hands of a receiver, trustee, or other co	
appointed fiduciary by that fiduciary)	
Emmanuel Pacin	
(Typed or printed name of person signing)	
(Title of person signing)	