P080015503

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	ΓΙΟΝ:PACI	FICA ISLES INCORI	PORATED			
DOCUMENT NUMBER	OCUMENT NUMBER: P08000015502					
The enclosed Articles of A	Amendment and fee are su	bmitted for filing.				
Please return all correspon	ndence concerning this ma	tter to the following:				
	OLGA ADRIANA MORENO					
-						
8240 NW 52 ND TERRACE SUITE 305				15		
	Address					
DORAL, FL. 33166						
	E-mail address: (to be us	sed for future annual re	report notifi	cation)		
For further information co	ncerning this matter, pleas	se call:				
OLGA ADRIANA MOR	ENO	at (305	676-6576 Daytime Telephone Number		
Name of C	ontact Person	Are	ea Code & I	Daytime Telephone Number		
Enclosed is a check for the	e following amount made	payable to the Florida	Departmen	t of State:		
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee Certified Copy (Additional copy i enclosed)	is C	52.50 Filing Fee ertificate of Status ertified Copy Additional Copy s enclosed)		
Amendr Divisior P.O. Bo	Address nent Section n of Corporations x 6327 ssee, FL 32314	A D C 20	lifton Build	Section Corporations ling (ve Center Circle		

Articles of Amendment to Articles of Incorporation of

FILED

PAFICICA ISLES INCORPORATED

2017 OCT -6 PM 2: 33

(Name of Corporation as currently	filed with the Florida	
P08000015502		GATE A JOSEPH FLORIDA
(Document Number of C	Corporation (if known)	7)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	lorida Profit Corporati	on adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation, "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "C word "chartered," "professional association," or the abbreviation "P	o". A professional coi	
B. Enter new principal office address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
		
D. If amending the registered agent and/or registered office addresses new registered agent and/or the new registered office address:	ss in Florida, enter the	hame of the
Name of New Registered Agent		
Terme of free regimes en rigem		
(Florida stree	t address)	
New Registered Office Address:		, Florida
(0	City)	(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent. I am familiar wi	th and accept the obliga	itions of the position.
		<u> </u>
Signature of New Reg	gistered Agent, if chang	in g

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= Trusted; 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 <u>PT</u> John Doe X Remove ¥ Mike Jones X AddSVSally Smith Type of Action Title_ <u>Name</u> <u>Address</u> (Check One) ABIN, JOSE G. SD 1756 N BAYSHORE DR. 1) ____ Change X _ Add APT, 30B MIAMI, FL 33132 ____ Remove 2) ____ Change ____ Add ____ Remove 3) ____ Change ____ Add __ Remove 4) ____ Change ___ Add __ Remove 5) ____ Change Add ____ Remove

6) ____ Change

Add

___ Remove

E. If amending or adding additional Articles, enter change(s) here:	
(Attach additional sheets, if necessary). (Be specific)	
	-
If an amendment provides for an exchange, reclassification, or cancellation of is provisions for implementing the amendment if not contained in the amendmen	ssued shares, t itself:
(if not applicable, indicate N/A)	
···	

The date of each amendment(s) adoption:	, if other than the
Effective data if applicables	
(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, document's effective date on the Department of State's records.	this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amend by the shareholders was/were sufficient for approval.	dment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment	
"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 shareholder action was not required.	areholder
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	older
09/25/2017 Dated	
Signature	
(By a director, president or other officer – if directors or officers have no selected, by an incorporator – if in the hands of a receiver, trustee, or other appointed fiduciary by that fiduciary)	ot been her court
JONATHAN GOMEZ	
(Typed or printed name of person signing)	
VICEPRESIDENT	
(Title of person signing)	