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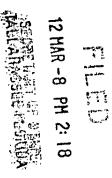
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Special Instructions to	Filing Officer:	
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Office Use Only



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Amend

MAR 8 2012

T. LEWIS

COVER LETTER

TO: Amendment Section
Division of Corporations

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NAME OF CORPORATION:	away enterprises					
DOCUMENT NUMBER: POSONO	<u> </u>					
The enclosed Articles of Amendment and fee are submitted for filing.						
Please return all correspondence concerning this mat	tter to the following:					
Julio Gomez / Ivan Joel Gomez Name of Contact Person Po midway Enterprises Firm/Company						
Na Na	me of Contact Person					
Po midway Enterprises						
Firm/ Company						
3564 Avalon Park East Blyd # 238						
orlando. Flori	Address					
	y/ State and Zip Code					
	•					
e-mail address: (to be used for future annual report notification)						
E-mail address: (to be use	ed for future amual report notification)					
For further information concerning this matter, pleas	e call:					
Julio F. Gomez	at (407) 591-9037					
Name of Contact Person	Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:						
\$35 Filing Fee \$\times \text{Certificate of Status}\$	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)					
Miling Address Amendment Section Diffsion of Corporations Pio. Box 6327 Pallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building					



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 16, 2011

JULIO F. GOMEZ 3564 AVALON PARK BLVD. #238 ORLANDO, FL 32828

SUBJECT: PQ MIDWAY ENTERPRISES, INC

Ref. Number: P08000036381

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

THE DOCUMENT SUBMITTED CANNOT BE FILED TO MAKE CHANGES TO THE OFFICERS/DIRECTORS OF THE CORPORATION. ENCLOSED IS THE CORRECT FORM TO CHANGE BOTH THE OFFICERS AND DIRECTORS AND ALSO THE REGISTERED AGENT. WE DO HAVE YOUR FILING FEE OF \$35 TO APPLY TO THE FILING OF THE AMENDMENT.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Connell Regulatory Specialist II

Letter Number: 111A00025931

12 HAR -8 PM 2: 18

Articles of Amendment to Articles of Incorporation

	Articles of Incorpor	ation		MANSSIA PAR
06	of	•	•	The Silling
ra midr	vay enterpr	15es,	Inc.	
(Name of Corporation as	currently filed with the Fl	orida Dept. o	f State)	
P0800	00 36 381			
	nt Number of Corporation (if	`known)		
rsuant to the provisions of section 60 nendment(s) to its Articles of Incorpora	tion:	nis <i>Florida Pr</i>	rofit Corporat	ion adopts the followi
e new name must be distinguishable a breviation "Corp.," "Inc.," or Co.," me must contain the word "chartered,"	or the designation "Corp,"	"Inc," or "Co	o". A profess	sional corporation
Enter new principal office address, rincipal office address <u>MUST BE A S</u>		· · · · · · · · · · · · · · · · · · ·		
	•			
Enter new mailing address, if appli (Mailing address MAY BE A POST)				
:	·	· · · · · · · · · · · · · · · · · · ·		
If amending the registered agent an new registered agent and/or the new			, enter the na	me of the
Name of New Registered Agent:				
3	3564 Avalon Par	k blyd	East #	238
	(Florida stree	et address)		
New Registered Office Address:	orlando		, Florida	32828
	(City)			(Zip Code)
·				
w Registered Agent's Signature, if cl			•	
reby accept the appointment as regist	ered agent. I am familiar w	ith and accept	the obligation	s of the position.

Signature of New Registered Agent, if changing

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officer/director.

(Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an

additional sheet.)

Title(s)	Name Tran Joel Gomez	<u> </u>	dress 5124 Avalon 238	Pank Blvd	East
2) <u>VP</u>	Juid F. Gonez	QL	and FL 3 Same as a		
3)					,
4)					
5)					
6)		_ =			
If REMOVING an of	fficer and/or director, please list th	ne title(s) and na	me of the officer/dire	ector to be removed:	
Title(s) Nam	· .	Title(s)	<u>Name</u>		
1) P JC	uio Gomez	4)			
2)		5)		· •	٠.,

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)
The date of each amendment(s) adoption: $\frac{D2}{27}$
Effective date if applicable:
(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" (voting group)
(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.
Dated
(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)
Ivan Joel Gonez
(Typed or printed name of person signing)
President
(Title of person signing)