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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORAT	ION: Pascalvac I	nc	
DOCUMENT NUMBER	. P0900005704	3	
The enclosed Articles of A	mendment and fee are sub	omitted for filing.	
Please return all correspon	dence concerning this mat	ter to the following:	
Ol	liver Huttner		
		Name of Contact Persor	1
M	anagement Tax	Consulting, Inc	
		Firm/ Company	· · · · · · · · · · · · · · · · · · ·
44	130 Orchid Blvd	Ste 202	
_		Address	
<u>Ca</u>	ape Coral, FL 3		·
		City/ State and Zip Code	2
mtc.fle	orida@gmail.co	m	
· ·		ed for future annual report	notification)
For further information concerning this matter, please call:			
Oliver Huttner		at (239	, 645-4208
Name of Co	ontact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the	following amount made p	ayable to the Florida Depa	rtment of State:
■ \$35 Filing Fee	□\$43.75 Filing Fee & 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)
Amendm Division P.O. Box	Address nent Section of Corporations x 6327 see, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Te Alice La Proposition Control of the Propositi

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the F	lorida Dept. of State)	•
P09000057043		
(Document Number of Corporation (if	f'known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this lits Articles of Incorporation:	Florida Profit Corporation adopts the following	g umendment(s)
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation ".	n," "company," or "incorporated" or the al Co". A professional corporation name must c	The new obtreviation contain the
B. Enter new principal office address, if applicable;	4430 Orchid Blvd Ste 202	
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	Cape Coral, FL 33904	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4430 Orchid Blvd Ste 202	
	Cape Coral, FL 33904	
D. If amending the registered agent and/or registered office address: Name of New Registered Agent		
(Florida str		
New Registered Office Address:(City)	Florida (Zip Code)	•
New Registered Agent's Signature, if changing Registered Agent:		
t hereby accept the appointment as registered agent. I am familiar w	vith and accept the obligations of the position.	

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.

Example: X Change	PT	John Doc	
X Remove	Y	Mike Jones	
_X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	Р	Heinz Ploechinger	4430 Orchid Blvd Ste 202
Add			Cape Coral, FL 33904
Remove			
2) Change	·		
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Parmonta			

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)	
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:	
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provisions for implementing the amendment if not contained in the amendment itself:	

The date of each amendmen	t(s) adoption: 07/31/2014	_, if other than the
date this document was signed	ļ.	
Effective date if applicable:	07/31/2014	
The state of the s	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(<u>CHECK ONF</u>)	
	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
Dated 08	.181. 2014 (Mal)	
Signature _	Mallux 1	
s	By a director, president or other officer — if prectors of officers have not been elected, by an incorporator — if in the hands of a receiver, trustee, or other court populated fiduciary by that fiduciary)	
	Heinz Ploechinger	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	