## P100000044806

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## **COVER LETTER**

TO: Amendment Section

Division of Corporations Palm Beach Services, Inc P 10000046806 **DOCUMENT NUMBER:** The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Palm Beach Services, Inc. 9436 Cross Creek Dr. Boynton Beach, FL 33436 City/State and Zip Code KrystaBoltz@gmail.com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ( 561 ) 736-5976

Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee **L**\$43.75 Filing Fee & **□\$**43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) Mailing Address Street Address Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

## **Articles of Amendment**

to

## Articles of Incorporation

of

Palm Beach Serv	ices, Inc	
(Name of Corporati	on as currently filed with the Fk	orida Dept. of State)
P10000046806		
(Docum	nent Number of Corporation (if kn	own)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	a Statutes, this <i>Florida Profit Cor</i>	poration adopts the following amendment(s)
A. If amending name, enter the new name of the co	orporation:	
		The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp. word "chartered," "professional association," or the	," "Inc," or "Co". A profession	r "incorporated" or the abbreviation
B. Enter new principal office address, if applicable		
(Principal office address <u>MUST BE A STREET ADL</u>	<u>DRESS</u> )	_,
		TALL SE
	<u> </u>	77
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>	
D. If amending the registered agent and/or register	red office address in Florida, ent	er the name of the
new registered agent and/or the new registered		<del></del>
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		. Florida
The Manager of the Control of the Co	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg		Altrica and an
I hereby accept the appointment as registered agent.	i am jamiliar with and accept the	onigations of the position.
Sign	ature 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.

Example: X Change	<u>PT</u>	John Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Address</u>
1) Change	7	Robert LaRocca	9436 Cross Creak D Boynton Beach, FL
Add Remove			Boynton Beach, FL 33436
2) Change			
Add			
Remove			
3) Change			
Add			<del></del>
Remove			<u> </u>
4) Change			
Add			-
Remove			
5) Change			
Add			
Rеточе			
6) Change			
Add			
Remove			

	(Be specific)
	·
	***
	<u> </u>
an amendment provides for an excl	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
an amendment provides for an exclusions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

The date of each amendment(s) ad date this document was signed.	loption:		, if other than th
date this document was signed.			
Effective date <u>if applicable</u> :	(no more than 90	days after amendment file date)	
	(no more man 90	adys after umenament file date)	
Note: If the date inserted in this b document's effective date on the De		ble statutory filing requirements, this	date will not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )		
The amendment(s) was/were ado by the shareholders was/were su		number of votes cast for the amendmen	nt(s)
		igh voting groups. The following state of the 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 ado action was not required.	pted by the board of directors w	vithout shareholder action and sharehol	lder
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators witho	ut shareholder action and shareholder	
Dated	0/23/18		
Signature	Lusta Bo	et	
, ,	•	r = if directors or officers have not been hands of a receiver, trustee, or other co	
	ted fiduciary by that fiduciary)	names of a receiver, trustee, or outer ec	· ·
	Krysta E	ame of person signing)	
	(Typed or printed na	ame of person signing)	
	Director		
	(Title of	person signing)	