P11000010482

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
- (Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
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Anand C.COULLIETTE

APR 19 2011

EXAMINER

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	PRATION:	The Fredrico C	orp.	_
DOCUMENT NUM	IBER:	P11000010	482	
The enclosed Article	s of Amendment and fee a	are submitted for filing.		
Please return all corr	espondence concerning th	is matter to the following:		
_		Evie Mostacci	,	
	1	Name of Contact Person		
	· V	innys Super Pawn Firm/ Company		
		rimi/ Company	•	
_	1085	7 SW 91st Ave Unit A		
		Address		
_		Ocala, Fl 34481		
		•		
	E-mail address: (to be use	erpawn@yahoo.com d for future annual report notifica	ation)	
For further information	on concerning this matter,	please call:		
	vie Mostacci	at (352)	237-4447	_
Name of	Contact Person	Area Code & Dayti	me Telephone Number	
Enclosed is a check f	or the following amount n	nade payable to the Florida l	Department of State:	
☑ \$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	\$43.75 Filing Fee & Certified Copy (Additional copy is enclo		Status
Mailing Add Amendment S Division of C P.O. Box 632	Section orporations	Street Address Amendment Section Division of Corporatio Clifton Building	ns	

2661 Executive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 12, 2011

EVIE MOSTACCI VINNYS SUPER PAWN 10857 SW 91ST AVE., UNIT A OCALA, FL 34481

SUBJECT: THE FREDRICO CORP.

Ref. Number: P11000010482

We have received your document for THE FREDRICO CORP. 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 must be signed by the chairman, any vice chairman of the board of directors, its president, or another of its officers.

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) 245-6903.

Cheryl Coulliette Regulatory Specialist II

Letter Number: 411A00008830

HECEIVED

1 APR 19 AM 8: 10
ECRETARY OF STAT

Articles of Amendment to , , Articles of Incorporation of

The Fr	redrico Corp.			
(Name of Corporation as curre	ntly filed with the Florida Dept. o	of State)		
P110	000010482			
(Document Num	ber of Corporation (if known)			
Pursuant to the provisions of section 607.1006 amendment(s) to its Articles of Incorporation:	5, Florida Statutes, this Florida Pr	ofit Corporation ac	lopts the followi	ng
A. If amending name, enter the new name of	the corporation:			
			The new	
name must be distinguishable and contain to abbreviation "Corp.," "Inc.," or Co.," or the name must contain the word "chartered," "prof	designation "Corp," "Inc," or "C	o". A professional		
B. Enter new principal office address, if appl		der Fred Trick village and the control of the contr	_	
(Principal office address <u>MUST BE A STREE)</u>	T ADDRESS)			
	*************************************	**************************************		
				
C. Enter new mailing address, if applicable:				
(Mailing address <u>MAY BE A POST OFFIC</u>	<u></u>		_	
				
D. If amending the registered agent and/or renew registered agent and/or the new registered.		, enter the name of	<u>the</u>	
	tered office address.			
Name of New Registered Agent:			₩ -	
			LCG P	
New Registered Office Address:	(Florida street address)		表之	=
-	(0)	, Florida	SS 72 9	E
	(City)	(Zip Code)	11 APR 19 AM 10: 57	_
New Registered Agent's Signature, if changin			· SE 5	
thereby accept the appointment as registered as	gent. I am familiar with and accep	t the obligations of i	ne po sițio n. —	

Signature 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:

ģ.

(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
T	Ferdinando Mostacci	12991 SW 72 Ter Rd Ocala, Fl. 34473	☑ Add □ Remove
	dditional sheets, if necessary). (Be sp		
	TANDER PORT LEGISLAND		
provisio	nendment provides for an exchange, ons for implementing the amendmen ot applicable, indicate N/A)		
I am chan	ging my shares - I, Evie Mostaco	ci will own 70% and Vincent,	Joseph
and Ferdir	nando will own 10% each.		

The date of each amendment	(s) adoption: <u>April 7, 2011</u>
्रः ः ६. Effective date <u>if applicable</u> :	April 7, 2011 April 7, 2011
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) are sufficient for approval.
	re approved by the shareholders through voting groups. The following statement d 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)
action was not required. The amendment(s) was/wer	re adopted by the board of directors without shareholder action and shareholder re adopted by the incorporators without shareholder action and shareholder
action was not required.	
Dated April	7,2011
Signature	
(By selec	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other court pinted fiduciary by that fiduciary)
	Evie Mostacci
	(Typed or printed name of person signing)
	President
	(Title of person signing)