P11000010482

(Re	equestor's Name)	
(Ad	dress)	•
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	,
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MAY 27 2015 C MCNAIR

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	The Fredrico Corp.			
DOCUMENT NUME	P11000010482			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this mat	tter to the following:		E 95
	Evie Mostacci			gm
		Name of Contact Perso	n	
	Vinnys Super Pawn		-	
	8810 SW Hwy 200 Ste 121	Firm/ Company		
		Address		
	Ocala, Fl 34481			
		City/ State and Zip Cod	e	
vinny	ssuperpawn@yahoo.com			
	E-mail address: (to be us	ed for future annual report	notification)	_
For further information	concerning this matter, pleas	e call:		
Evie Mostacci		352 at (237-4447	
Name o	of Contact Person		ode & Daytime Telephone N	umber
Enclosed is a check for	r the following amount made p	payable to the Florida Depa	artment 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)	
Ame Divi P.O.	ling Address ndment Section sion of Corporations Box 6327 nhassee, FL 32314	Ameno Divisio Cliftor 266 I	Address Idment Section on of Corporations on Building Executive Center Circle assee, FL 32301	

Articles of Amendment to Articles of Incorporation of

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	3/ P	
Shape.	-32	S. March

The Fredrico Corp

(Name of Corporation	<u>on as currently filed with the Florida De</u>	ept. of State) $\mathcal{Z} \mathcal{O}_{\mathcal{A}} \mathcal{C}_{\mathcal{A}}$
1000010482		
(Docum	nent Number of Corporation (if known)	*#
uant to the provisions of section 607.1006, Florida articles of Incorporation:	a Statutes, this Florida Profit Corporation	adopts the following amendmen
f amending name, enter the new name of the co	orporation:	
		The new
e must be distinguishable and contain the wor. orp.," "Inc.," or Co.," or the designation "Corp., d "chartered," "professional association," or the	," "Inc," or "Co". A professional corpe	
Enter new principal office address, if applicable		
ncipal office address <u>MUST BE A STREET ADD</u>	<u>ORESS</u>)	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BO	(V)	
Matting dataress MAT BE A FOST OF FICE BO	<u> </u>	
If amending the registered agent and/or register	red office address in Florida, enter the n	ame of the
new registered agent and/or the new registered	office address;	
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		, Florida
	(City)	(Zip Code)
New Registered Office Address:	(City))
w Registered Agent's Signature, if changing Reg		
reby accept the appointment as registered agent.		ons of the position.
Sign	ature of New Registered Agent, if changin	g
2.5	g : " : - 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= 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 Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	ones	
X Add	<u>SV</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	D		Charity Mostacci	4608 NE 10th Street
X Add				Ocala, Fl. 34481
Remove				
2) Change		_		
Add				
Remove				
3) Change			·	
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
(Channel				
6) Change Add		_		
Add Remove				
Kemove				<u> </u>

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
Evie Mostacci shares will be 70%, Ferdinando Mostacci shares will be 10%, Amanda Glennon shares will be 10% &
Charity Mostacci shares will be 10% for a total of 100%
<u> </u>
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)

May 18th, 2015	
ption:	, if other than
8th, 2015	
(no more than 90 days after amendment file date)	
	nis date will not be listed as
(<u>CHECK ONE</u>)	
	nent(s)
• •	
(voting group)	
'	
· •	
	court
(Houciary by that Houciary)	
vie Mostacci	
(Typed or printed name of person signing)	
resident	
(Title of person signing)	
till oa till o	(no more than 90 days after amendment file date) (no more than 90 days after amendment file date) (ock does not meet the applicable statutory filing requirements, the artment of State's records. (CHECK ONE) (ted by the shareholders. The number of votes cast for the amendment ficient for approval. (over a provided to vote separately on the amendment(s) or the amendment(s) was/were sufficient for approval (voting group) (voting group) (ted by the board of directors without shareholder action and share ted by the incorporators without shareholder action and shareholder by an incorporator — if in the hands of a receiver, trustee, or other diduction diduction in the fiduction of the fiductio