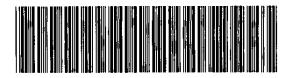
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JUL 28 2016

C LEWIS

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	The Fredrico Corp		
DOCUMENT NUMB	P11000010482 ER:		<u></u>
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Evie Mostacci		
•		Name of Contact Person	1
	Vinnys Super Pawn		
-		Firm/ Company	
	8810 SW Hwy 200 Ste 121	, ,	
-		Address	
	Ocala, Fl. 34481		
		City/ State and Zip Code	e
vinny	ssuperpawn@yahoo.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
Evie Mostacci		352 at (237- 441 7)
Name o	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the following amount made	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)
	ling Address		Address
Amendment Section		Amendment Section	
Division of Corporations Division of Corporations		•	
P.O. Box 6327			Building
Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of



The Fredrico Corp	MAINING COMMISSION
(Name of Corporation P11000010482	on as currently filed with the Florida Dept. of State JUL 20 PM 1: 00
Marketine account of the contract of the contr	
(Docum	ent Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to
A. If amending name, enter the new name of the co	rporation:
name must be distinguishable and contain the word	The new d "corporation," "company," or "incorporated" or the abbreviation ""Inc," or "Co". A professional corporation name must contain the abbreviation "P.A."
B. Enter new principal office address, if applicables (Principal office address MUST BE A STREET ADD	
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BO)</u>	<u>X</u>)
D. If amending the registered agent and/or register new registered agent and/or the new registered of	
Name of New Registered Agent	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	istered Agent: I am familiar with and accept the obligations of the position.
Signo	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 Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	Charity Mostacci	4608 NE 10th Street
Add			OCALA, FL 34481
X Remove			
2) Change	S	Amanda Glennon	276 Murcia Dr Apt 205
X Add	,		Jupiter, Fl. 33458
Remove	V	Ferdinando Mostacci	12991 SW 72nd Terrace Road
3)Change			Ocala, Fl. 34473
Add Remove			
4) Change	T	Cynthia Tieche	2165 SW 80th Street
4) Change X Add			Ocala, Fl. 34476
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			-
Remove			

hares will be 80%, Ferdinando Mostacci will be 10%, Amanda Glennon will be 5% and C	
	Cynthia Tieche
r a total of 100% shares.	
·	
for implementing the amendment if not contained in the amendment itself:	
	
	ment provides for an exchange, reclassification, or cancellation of issued shares, for implementing the amendment if not contained in the amendment itself: applicable, indicate N/A)

July 10, 2010	
, ,	_, if other than the
date this document was signed. July 18, 2016	
Effective date if applicable:	FILEU METARY OF STATE
(no more than 90 days after amendment file date) IVISt	N OF CURPORATION
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date. document's effective date on the Department of State's records.	Ult 120isted Aslan 00
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
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.	20 JUL 20
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	20 PH
July 18, 2016	
Dated	1: 00 1: 00
Sign above	9
Signature (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)	,
Evie Mostacci.	
(Typed or printed name of person signing)	
(Title of person signing)	
(Title of person signing)	