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(Requ	uestor's Name)	
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COVER LETTER

TO: Amendment Section Division of Corporations
NAME OF CORPORATION: The Paw Depot, INC
DOCUMENT NUMBER: P120 000 35 292
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Matt Aschendorf
Name of Contact Person The Paw De pot Inc Firm/ Company
1393 w Palmetto Park Rd
BOCA RATON F1 33486 City/State and Zip Code
Matt O Paw-Depot. Com
For further information concerning this matter, please call: (561) 338 - 7450 STORE
Matt Aschendoef at 954 415 3328 CELL Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$35 Filing Fee & Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

·	
(Name of Corporation as currently filed with the Flori-	da Dept. of State)
The PAW DEPOT	TNC
. (Document Number of Corp	poration (if known)
Pursuant to the provisions of section 617.1006, Florida Statutes, amendment(s) to its Articles of Incorporation:	
A. If amending name, enter the new name of the corporation	<u>.</u>
	The new
name must be distinguishable and contain the word "corporatio "Company" or "Co." may not be used in the name.	m" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS)	
(17th cyal ogyice and cas <u>Proof 227 Street restreet</u>)	
	Z S S S S S S S S S S S S S S S S S S S
-	
C. Enter new mailing address, if applicable:	-8 -
(Mailing address MAY BE A POST OFFICE BOX)	
_	
•	CO
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office ad	
	chenoorf
<u>1393 W</u>	Palmetto Park Rd Florida street address)
New Registered Office Address:	
Baca R	LATON Florida 33486
(City)	(Zip Code)
New Registered Agent's Signature, if changing Registered A	
I hereby accept the appointment as registered agent. I am fam.	iliar with and accept the obligations of the position.
	<i>t</i>
Signature of New R	egistered Agent, if changing

Page 1 of 4

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 <math>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 X Remove X Add		Doe Jones Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Khange Add	<u>P</u>	Matt Aschendorf	1393 W Palmetto Park Re Boca Raton Fl 33486
Remove 2) Change Add	<u>V_</u>	Adrizu McClelland	1393 W Palmetto Park R. Bosa Raton Fl 33486
Remove 3) Change Add			
Remove 4) Change Add			1
Remove 5) Change Add			
Remove 6) Change Add			
Remove			

amending or adding additional Ar ttach additional sheets, if necessary).	(Be specific)		
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	<u> </u>		
T. A. Marine - Marine			
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	e date of each amendment(s) adoption:	_, if other than the
Effe	ective date <u>if applicable</u> :	
	(no more than 90 days after amendment file date)	
Ado	option of Amendment(s) (CHECK ONE)	
	The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.	
区	There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.	
	$\frac{10/2/2013}{}$	
	Signature Matt H	
	(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	_
	Matt Aschendorf	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	

. . . .