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## **COVER LETTER**

TO: Amendment Section

Division of Corp	orations			
NAME OF CORPO	RATION: PERTIME,	INC.		
DOCUMENT NUM	BER: P1300004178	3		
The enclosed Articles	of Amendment and fee are su	omitted for filing.		
Please return all corre	spondence concerning this mat	ter to the following:		
	FERNAN ECHAV	'ARRIA		
		Name of Contact Person		
PERTIME, INC. / New Name: PAYLIVE, INC.				
Firm/ Company				
6010 NW 99TH AVENUE SUITE 107  Address				
	DORAL, FL 3317			
City/ State and Zip Code				
fo	Anartima not			
160	pertime.net  E-mail address: (to be us	ed for future annual report	notification)	
	(	,	•	
For further information	on concerning this matter, pleas	e call:		
FERNAN ECHAVARRIA				
Name	of Contact Person	Area Code & Daytime Telephone Number		
Enclosed is a check for	or 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)	
	iling Address	Street Address		
	nendment Section vision of Corporations	Amendment Section Division of Corporations		
P.C	). Box 6327	Clifton Building		
Tal	lahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301		

## Articles of Amendment to Articles of Incorporation of



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PERTIME, INC.		,
(Name of Corporation as currently filed with the	Florida Dept. of State)	
P13000041783		
(Document Number of Corporation (	if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this ts Articles of Incorporation:	Florida Profit Corporation add	opts the following amendment(s)
. If amending name, enter the new name of the corporation:		
PAYLIVE, INC.		The new
name must be distinguishable and contain the word "corporation". "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporat	ated" or the abbreviation
3. Enter new principal office address, if applicable:	6010 NW 99TH AVE SUITE 107	
Principal office address <u>MUST BE A STREET ADDRESS</u> )	DORAL, FL 331	78
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
	THE SAME	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office addres		e of the
Name of New Registered Agent		
(Florida st	reet uddress)	
New Registered Office Address:(City	, Florida	(Zip Code)
(Chy.	,	(Zip Code)
ew Registered Agent's Signature, if changing Registered Agent		
hereby accept the appointment as registered agent. I am familiar	with and accept the obligations	of the position.

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:

(Attach additional sheets, if necessary)

Example:

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.

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>	Address
1) Change			
Add			
Remove			
2) Change		<del>_</del>	<del> </del>
Add			
Remove			
3) Change			
Add			
Remove			
4) Change		·	
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
ORIGINAL COMMON STOCK IS: 1,000 Shares, Unit Price \$1.00
ADDITIONAL SHARES TO BE SUSCRIBE AND PAID will be 11,999.000 for a total
amount 12,000.000 shares at a unit price of \$1.00
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)

The date of each amendment(s) adoption: OCTOBER 22, 2014 , if other than the date this document was signed. **OCTOBER 22, 2014** Effective date if applicable: (no more than 90 days after amendment file date) Adoption of Amendment(s) (CHECK ONE) 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 (voting group) The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required. The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required. Dated OCTOBER 22, 2014 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) FERNAN ECHAVARRIA (Typed or printed name of person signing) PRESIDENT (Title of person signing)

9