P13000053095

(Re	equestor's Name)			
(Ac	ldress)			
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COVER LETTER

TO: Amendment Section

Division of Corporations				
NAME OF CORPORATION:	PACKMAN	1 INC		
DOCUMENT NUMBER: P1	300005309	5		
The enclosed Articles of Amend				
Please return all correspondence	concerning this ma	tter to the following:		
HINO	JOSA, MAN	NUEL R		
	<u> </u>	Name of Contact Person	n	
		Firm/ Company		
503 S	NIVELY RE)		
El Ol	SE, FL 3388	Address		
	<u>52, 12 0000</u>	City/ State and Zip Cod	• • • • • • • • • • • • • • • • • • •	
DCDI INC				
	C@LIVE.CO	/IVI sed for future annual report	notification)	
For further information concerni	ng this matter, pleas	se call;		
ELISA JACKSON		at (850	421-0552 de & Daytime Telephone Number	
Name of Contact Person		Area Co	de & Daytime Telephone Number	
Enclosed is a check for the follo	wing amount made	payable to the Florida Depa	artment of State:	
-	3.75 Filing Fee & rtificate 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)	
Mailing Address Amendment Section Division of Corporations		Street Address Amendment Section Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment Articles of Incorporation of

FILED

PACKMAN 1, INC		1- 1 L. L. ()
(Name of Corporation as	s currently filed with the Florida Dept.	of States MAR II AM IO: 07
P13000053095		- *
(Docume)	nt Number of Corporation (if known)	FALLABANCE, FLOR
Pursuant to the provisions of section 607. ts Articles of Incorporation:	1006, Florida Statutes, this Florida Profi	it Corporation adopts the following amendment(s
. If amending name, enter the new na	ame of the corporation:	
		The new
	nation "Corp," "Inc," or "Co". A proj	y," or "incorporated" or the abbreviation essional corporation name must contain the
3. <u>Enter new principal office address,</u> Principal office address <u>MUST BE A S</u>		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		
(matting uturess MAT BE A FOST)	OFFICE BOX	
		
 If amending the registered agent an new registered agent and/or the new 	nd/or registered office address in Florid	a, enter the name of the
	ELISA JACKSON	,
Name of New Registered Agent	2354 CHRISTOPHER F	PLACE
	(Florida street address)	
New Registered Office Address:	TALLAHASSEE	Florida 32308
New Registered Office Address.	(City)	(Zip Code)
N	4	·
New Registered Agent's Signature, if of hereby accept the appointment of register	wanging Kegistered Agem; Fred agent. I am familiar with and acce	pt the obligations of the position.
	(Consolid)	,
	gnature of New Registered Agent, if chan	ging

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:		The as an Add.	
X Change	PT	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	SV	EFREN HINOJOSA	503 SNIVELY RD
Add			ELOISE, FL 33880
Remove	\mathcal{C}	Clia I	
2) Change	<u>S</u>	Elisadaeluson	3384 Christopher 19
Add			Tallehasso. FZ 3308
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove	,		
6) Change			
Add			
Remove			

	tional sheets, if nece	ssary). (Be speci	fic)		
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rovisions	dment provides for for implementing	an exchange, recise the amendment if it	issification, or car not contained in t	ncenation of issued he amendment itse	snares, lf:
(if not	applicable, indicate	<i>N/A</i>)			_
				,	
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The date of each amendment(s) adoption: date this document was signed.	, if other than the
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	
by"	
by" (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.	
Signature (By a director, president of 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) (Typed or printed name of person signing)	ang
(Title of person signifie)	U