P13000087465

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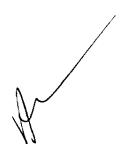


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SECRETARY OF STATE

APR 0 5 2017 T. LEMIEUX



COVER LETTER

Division of Corporations Pavelo Incorporat NAME OF CORPORATION: 13000087 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Sherman Street

Address

Lywood FL 33020

City/ State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (954), 655-6907 Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy

Mailing Address

TO: Amendment Section

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

is enclosed)

Articles of Amendment

to Articles of Incorporation of

Pave (o Inco	sporate	<i>.</i> } i	FILED	
	ation as currently file			<u>e</u>)
_ P13000	087465		APR - 3	5,
(Doc	cument Number of Cor	poration (it/k	REPARY OF SIA	· -
Pursuant to the provisions of section 607,1006, Flor		TALLA	HASSEE, FLOR	in.Δ
its Articles of Incorporation:	rida Statutes, this <i>Flor</i> i	ida Profit Coi	rporation adopts the	'Months amendment(s) to
as Articles of Incorporation.				
A. If amending name, enter the new name of the	e corporation:			
				The new
name must be distinguishable and contain the w "Corp" "Inc.,." or Co.,." or the designation "Co word "chartered," "professional association," or t	orp," "Inc," or "Co"	A professio	or "incorporated" (nal corporation nan	or the abbreviation we must contain the
B. Enter new principal office address, if applical	ble:			
(Principal office address MUST BE A STREET A)				
	_			<u> </u>
	_			
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE L</u>	<u>BOX</u>)			
	-		·	
D. If amending the registered agent and/or regis	tered office address in	n Florida, en	ter the name of the	
new registered agent and/or the new registere	ed office address:		the many of the	
Name of New Registered Agent				<u> </u>
	(Florida street ad	Strass I	<u> </u>	
	i was the same of the same			
New Registered Office Address:			, Florida	
	$\ell Cdy)$			(Zip Code)
New Registered Agent's Signature, if changing Re	egistered Agent			
hereby accept the appointment as registered agent.	. Lam familiar wah a	nd accent the	abligations of the ne	cololina
	g	an accorpt into	ovaganons of me pa	man,
Sig	gnature of New Registe	red 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> <u>Joh</u>	n Doe	
X Remove	<u>V</u> <u>Mik</u>	ce Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	1	Darin Whelan	2000 Sharman Street
X Add			2000 Sherman Street Hollywood, FL 33020
Remove			
2) Change			
Add			
Remove			
3.) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
5) Change			
Add			
Remove			

Attach additiona	idding additional Art I sheets, if necessary).	(Be specific)			
<u> </u>				· · · · · · · · · · · · · · · · · · ·	-
				- ·	<u> </u>
					
		·			
<u> </u>					
					
<u>royisions for in</u>	provides for an exch nplementing the amer	ange, reclassifica ndment if not con	<u>tion, or cancellati</u> tained in the ame	ion of issued shar endment itself:	es,
(if not applic	able, indicate N/A)			arounciic it.K.II.	
		-			
					
					
					
					

The date of each amendment(s) adoption:		, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does no document's effective date on the Department of	ot most the applicable statutory filing requirements, this date State's records.	will not be listed as the
Adoption of Amendment(s) (CH	ECK ONE)	
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a	shareholders. The number of votes east for the amendment(s) approval.	
☐ The amendment(s) was/were approved by the must be separately provided for each voting	shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):	
"The number of votes east for the amen	dment(s) was/were sufficient for approval	
by		
by(vot	ing group)	
☐ The amendment(s) was/were adopted by the baction was not required	poard of directors without shareholder action and shareholder	
The amendment(s) was/were adopted by the i action was not required.	neorporators without shareholder action and shareholder	
Dated 3/25/17	·	
Signature		
(By a director, presic selected, by an incor appointed fiduciary	dent or other officer – if directors or officers have not been porator – if in the hands of a receiver, trustee, or other court by that fiduciary)	
	Typed or printed name of person signing)	
(1	yped or printed name of person signing)	
<u> </u>	President	
	(Title of person signing)	