PIBOOS 34

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R. WHITE

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: PIP MANAGEMENT COLP. P130000 88734 DOCUMENT NUMBER: ____ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Paul LituiN Name of Contact Person PIP Mynngement Carp-Firm/ Company 899 SW 16th St Address Fora Randow FL 33486

City/ State and Zip Code Processe quail.com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Paul Lituin at (984) 657-/037

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 is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section **Division of Corporations** Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment to Articles of Incorporation

FILED

Of .		14 APR -9 A	9:20
PIP Mnungaryent corp		Cross,	"''
(Name of Corporation as currently filed with the Flo	orida Dept. of State)	TALLAHASSEE E	
	P130000887	34	EURUA -
(Document Number of Corporation (if	known)		_
ursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> s Articles of Incorporation:	Torida Profit Corporati	on adopts the followin	g amendmen
. If amending name, enter the new name of the corporation:	NA		The new
ame must be distinguishable and contain the word "corporation Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Corp or "Cord" (chartered," "professional association," or the abbreviation "I	Co". A professional co	corporated" or the a rporation name must	_ bbreviation
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	10//		- -
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A		-
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address: Name of New Registered Agent		e name of the	-
New Registered Office Address: (Florida stre	ret address) To fine the control of	orida NA (Zip Code)	-
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w		ations 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)

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	PT	John Do	<u>oe</u>	
X Remove	$\underline{\mathbf{v}}$	Mike Jo	nes	
X Add	<u>\$V</u>	Sally Sr	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	CFO	<u>) </u>	Greg Guzzo	6895 long Key St lake worth
Add				lake worth
Remove			•	FL 33467
2) Change				
Add				
Remove				te-1111
3) Change		 -		
Add				
Remove				
4) Change		_		
Add				
Remove				<u> </u>
5) Change				
Add				
Remove				
6) Change		_		
Add				
Pamaya				

ttach additional sheets, if necessary).	cles, enter chang (Be specific)	k 1	1A	
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an amendment provides for an exclusions for implementing the ame	ange, reclassific	ation, or cancells	tion of issued sh	ares,
	ndment if not co	<u>ntained in the an</u>	<u>iendment itself:</u>	
rovisions for implementing the ame	hanipit 4 has so			
rovisions for implementing the ame (if not applicable, indicate N/A)		WA		
rovisions for implementing the ame (if not applicable, indicate N/A)		NA	<u> </u>	
rovisions for implementing the ame (if not applicable, indicate N/A)		NIA		
rovisions for implementing the ame (if not applicable, indicate N/A)		NA		
rovisions for Implementing the ame (if not applicable, indicate N/A)		NA		
rovisions for Implementing the ame (if not applicable, indicate N/A)		NA		
rovisions for Implementing the ame (if not applicable, indicate N/A)		NIA		
rovisions for implementing the ame (if not applicable, indicate N/A)		NA		
rovisions for Implementing the ame (if not applicable, indicate N/A)		NIA		

The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable: N/(Y (no more than 90 days after amendment file date)	
(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	
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 4/7/14	
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)	
(Typed or printed name of person signing)	
(Typed or printed name of person signing)	
Pres.	
(Title of person signing)	