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And

JUN 13 2014

R. WHITE

COVER LETTER

TO: Amendment Section

Division of Corpo	prations			
NAME OF CORPORATION: Palm Beach Fix it Inc, DOCUMENT NUMBER: P1400005068				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	tter to the following:		
	George	Heising. Name of Contact Person		
		Firm/ Company		
	14462 82	nd Lune n	Jorth ·	
	14462 82nd Lane North. Address Lovahatchee, FL 33470 City/ State and Zip Code			
		City/ State and Zip Code		
	Palm Deach E-mail address: (to be us	Fly 1+ (a gm ged for future annual report	notification)	
For further information	n concerning this matter, pleas	se call:		
George	Heising	at (561	308, 9130	
Name o	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	irtment 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)	
Mailing Address		Street	Address	
Amendment Section		Amendment Section		
Division of Corporations P.O. Box 6327		Division of Corporations Clifton Building		
	Box 6327 ahassee, FL 32314		xecutive Center Circle	

Tallahassee, FL 32301

Articles of Amendment

	Articles of Amendmen	t Till En
	to Articles of Incorporatio of	n 14 011 -2 77 1:42
Palm Beach	FIX IT, Inc.	$\frac{1}{2}$
(Name of Corporation as c	urrently filed with the Florida De	pt. of State)
T 140000	Number of Corporation (if known)	
(Document	Number of Corporation (if known)	
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006, Florida Statutes, this <i>Florida P</i>	rofit Corporation adopts the following amendment(s) t
A. If amending name, enter the new nam	ne of the corporation:	
		The new
name must be distinguishable and conta "Corp.," "Inc.," or Co.," or the designat word "chartered," "professional association	ion "Corp," "Inc," or "Co". A p	pany," or "incorporated" or the abbreviation professional corporation name must contain the
B. Enter new principal office address, if		
(Principal office address <u>MUST BE A STI</u>	REET ADDRESS)	
		
C. Enter new mailing address, if applica (Mailing address MAY BE A POST Of		
(muning unitess MAT BEAT OST OF		
D. If amending the registered agent and	or registered office address in Flo	rida, enter the name of the
new registered agent and/or the new		
Name of New Registered Agent	Kay E. Hocken	smith Jr.
	108 Knights	Ct.
-	(Florida street address)
New Registered Office Address:	Koyal Palm B	each Florida 33411
	(City)	(Zip Code)
New Registered Agent's Signature, if cha	inging Registered Agent:	
I hereby accept the appointment as register		ccept the obligations of the position.

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>	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	Off.	Ray Hockersmith	10 Knights Ct.
Add			<u>Royal Palm Beneni</u>
Remove			Royal Palm Benen. Flurar 33411
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change	-		
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

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)	(Att	nending or adding additional Articles, enter change(s) here: ch additional sheets, if necessary). (Be specific)	
provisions for implementing the amendment if not contained in the amendment itself:			
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provisions for implementing the amendment if not contained in the amendment itself:			
(if not applicable, indicate N/A)	<u>lf a</u>	amendment provides for an exchange, reclassification, or cancellation of issued shares,	
	pr	(if not applicable, indicate N/A)	
		(V)	
		· · · · · · · · · · · · · · · · · · ·	

The date of each amendment(s) adoption:	, 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	
(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 5 (27) 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)	