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Amend + Name Charge

'AUG 0 6 2014 T. CARTER TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:	Personal	Estate Management INC
DOCUMENT NUMBER: P /	4000017215	<u> </u>
The enclosed Articles of Amendment and f	ee are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
4	DAVID E. RAW	MAN
	Name of Contact	Person
	Prosect	en. F
	Firm/ Compa	ny
$\mathcal P$	OBOX 32	2
	Address	
	llenton	FL 34222
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Name of Contact Person		rea Code & Daytime Telephone Number
Protocod in a short for the following amount		Demandence of Chance
Enclosed is a check for the following amount	at made payable to the Florida	a Department of State:
\$35 Filing Fee		
Certificate of	Status Certified Copy (Additional copy	Certificate of Status 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 Tallahassee, FL 32314	,	Clifton Building 2661 Executive Center Circle
\	/	Fallahassee, FL 32301

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Personal Expedite Management, Inc.

## Articles of Amendment to

to
Articles of Incorporation
of



Personal Estale 1	I anage ment, Froll 23 PH 2:32			
(Name of Corporation as currently filed with the Flor				
P 140000 17215				
(Document Number of Corporation (if k	nown)			
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Flatis</i> Articles of Incorporation:	orida Profit Corporation adopts the following amendment(s) to			
A. If amending name, enter the new name of the corporation:  Personal  Est	Dedite Managerof, The new			
name must be distinguishable and contain the word "corporation"	" "company," or "incorporched" or the abbreviation			
"Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Coword "chartered," "professional association," or the abbreviation "P.				
B. Enter new principal office address, if applicable:	DAVID E BAUMAN			
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	980) Suicio Ci.			
	Parak Fl 34219			
	0			
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	CAUID E. BAUMAN			
Personal Expedite Management, Inc.	P.O Box 322			
PO BOX 322 Ellenton, FL 34222	ELLENTON, FL 31222			
D. If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:	s in Florida, enter the name of the			
Name of New Registered Agent				
(Florida street	address)			
New Registered Office Address:(City)	, Florida (Zip Code)			
(Cary)	(Zip Coue)			
New Registered Agent's Signature, if changing Registered Agent:  I 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)

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	PT John Doe	
X Remove	<u>V</u> <u>Mike Jones</u>	
X Add	SV Sally Smith	
Type of Action (Check One)	Title Name	<u>Addres</u> s
1) Change		
Remove		
2) Change		
Remove 3) Change		
Add		
4) Change		
Remove  5) Change		
Add Remove		
6) Change		
AddRemove		

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ımendment proyi	des for an exc	hange, reclas	sification, or ca	ncellation of is	sued shares,
isions for implem if not applicable, i	enting the amendicate N/A)	endment if no	t contained in	the amendmen	t itself:
		$V/_{\Delta}$			
		<i>/ //</i>			
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		)			
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The date of each amendment(s) adoption:	, if other than the
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"  (voting group)	
(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	
Signature <u>Cerco Jaumes</u> (By a director, president or other officer – if directors or officers have not been	<del></del>
selected, by an incorporator – if in the hands of a receiver, trustee, or other court	
appointed fiduciary by that fiduciary)	
DAVID E. BAUMAN	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	