P14000031321

(Requestor's Name)	
(Address)	
(
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAI	L
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

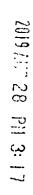
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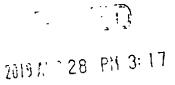


COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: INVESTMENTS	OF PC INC
DOCUMENT NUMBER: P14000031321	
The enclosed Articles of Amendment and fee are	submitted for filing.
Please return all correspondence concerning this m	natter to the following:
ЕНАВ АНМЕД	
INVESTMENTS OF PC IN	Name of Contact Person
	Firm/ Company
633 MALLORY DR	Tital Company
-	Address
PANAMA CITY, FL 32403	5
	City/ State and Zip Code
ELWAKIL436@YAHOO.COM	
E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, plea	ase call:
ЕНАВ АНМЕД	at (<u>850</u>) <u>276-8734</u>
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	e payable to the Florida Department of State:
■ \$35 Filing Fee	□S43.75 Filing Fee & □S52.50 Filing Fee Certified Copy (Additional copy is enclosed) □S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address 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

Articles of Amendment to Articles of Incorporation of



INVESTMENTS OF PC INC

(Name of Corporation as currently filed with the Florida	Dent. of State)	**
P14000031321	,	, ,
(Document Number of Corporation (if known)	<u>.</u>	
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporat</i> its Articles of Incorporation:	tion adopts the fo	llowing amendment(s) t
A. If amending name, enter the new name of the corporation:		
		The new
name must be distinguishable and contain the word "corporation," "company," or "in "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional co word "chartered," "professional association," or the abbreviation "P.A."		the abbreviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		
	_	
	· · · · · · · · · · · · · · · · · · ·	_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		·
D. If amending the registered agent and/or registered office address in Florida, enter the new registered agent and/or the new registered office address:	e name of the	
Name of New Registered Agent		
<u></u>		
(Florida street address)		
New Registered Office Address:	, Florida	
(City)		(Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	at a dist	
hereby accept the appointment as registered agent. I am familiar with and accept the oblig	gauons of the posi	ноп,
Signature of New Registered Agent if change		_

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 = Chie, 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>Y</u>	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	S	EHAB AHMED	633 MALLORY DR
X Add			PANAMA CITY, FL 32405
Remove			
2) Change			
Add			
Remove			
3) Change			-
Add			
Remove			
4) Change			
Add			
Remove			
-: 20			
5) Change	·· ·		
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Remove			
5) Change		-	
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Remove			

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an amendment pr	rovides for an excha	nge, reclassificatio	n, or cancellation	of issued shares,	
<u>grovisions for impl</u>	lementing the amend	dment if not contain	ned in the amendr	nent itself:	
(if not applicab	ole, indicate N/A)				
				 -	
	·				
				,	

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
Enective date in applicable.	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, this date of Department of State's records.	will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
☐ The amendment(s) was/were a must be separately provided for	oproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without shareholder action and shareholder	
AUGUST Dated	21, 2019	
Signature _		
selec	director, president or other officer – if directors or officers have not been ed, by an incorporator – if in the hands of a receiver, trustee, or other court nted fiduciary by that fiduciary)	
	ЕНАВ АНМЕО	
	(Typed or printed name of person signing)	
	PRESIDENT/SECRETARY	
	(Title of person signing)	<u> </u>