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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	PAK MECHANIC	'AL AC CORP	
	IBER:		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	tter to the following:	
	RASHID RIAZ		
		Name of Contact Perso	n
	PAK MECHANICAL AC CO	ORP	
		Firm/ Company	
	10751 SW 44TH ST		
		Address	
	MIAMI, FLORIDA 33165		
	· · · · · · · · · · · · · · · · · · ·	City/ State and Zip Cor	de
	pakmechanical@gmail.com		
	E-mail address: (to be us	sed for future annual repor	t notification)
for further informati	on concerning this matter, pleas		, 9757167
Name	of Contact Person	Area C	9757167 ode & Daytime Telephone Number
Enclosed is a check t	or the following amount made		
■ \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Di ^c P.C	niling Address nendment Section vision of Corporations D. Box 6327 Hahassee, FL 32314	Amen Divisi The C 2415	t Address dment Section on of Corporations Centre of Tallahassee N. Monroe Street, Suite 810 massee, FL 32303

Articles of Amendment to Articles of Incorporation of

PAK MECHANICAL AC CORP

(Name of Corporation as	currently filed with the Flo	orida Dept. of State)	
P14000081095			
(Document N	lumber of Corporation (if kn	own)	
Pursuant to the provisions of section 607.1006, Florida Statuts Articles of Incorporation:	ites, this Florida Profit Corp	poration adopts the following	ng amendment(s)
A. If amending name, enter the new name of the corpora	ution:		
			The new
name must be distinguishable and contain the word "corpora "Inc.," or Co.," or the designation "Corp," "Inc," or " "chartered," "professional association," or the abbreviation	"Co". A professional corp		
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>	<u> </u>		
Enter new mailing address, if applicable:			
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)			
	 ,	·	- 10-
). If amending the registered agent and/or registered of	fice address in Florida, ent	er the name of the	رن ا
new registered agent and/or the new registered office	address:		
Name of New Registered Agent			_
			_
ıF	lorida street address)		
New Registered Office Address:	(Civ)	Florida	· Cadar
	((15)	17.17	, Chac,
	(City)		r Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am for	d Agent: familiar with and accept the	obligations of the position.	
Signature o	of New Registered Agent, if a	hanging	

Check if applicable

■ The amendment(s) is/are being filed pursuant to s. 607,0120 (11) (e), F.S.

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 Doc 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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	PT	John Doe	
X Remove	Y	Mike Jones	
X Add	\underline{SV}	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	MGR	FAKHIR KHALIL	12201 NW 35TH ST UNIT 433
X Add			CORAL SPRINGS, FL 33065
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	ts, if necessary).	(Be specific)				
KHIR KHALIL 10% O	WNERSHIP					
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f an amendment prov	cides for an exc	hange, reclassi	fication, or can	cellation of issue	ed shares.	
provisions for implen	nenting the am					
(if not applicable,	indicate N/A)					
						
						
						

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• •

The date of each amendment(s date this document was signed.) adoption:	, if other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirements, this da Department of State's records.	te will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder acti-	on and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(e sufficient for approval.	s)
	approved by the shareholders through voting groups. The following statem for each voting group entitled to vote separately on the amendment(s):	था
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by RASHID RIAZ		
	(voting group)	
08/17/20 Dated Signature	GOV M.	
sele	a director, president or other officer – if directors or officers have not been cted, by an incorporator – if in the hands of a receiver, trustee, or other combinated fiduciary by that fiduciary)	1
	RASHID RIAZ	
	(Typed or printed name of person signing)	
	PRESIDNET	
	(Title of person signing)	