P16000026393

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COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: 123 Perlicabs Inc. P14000026893 DOCUMENT NUMBER: ____ The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Brian Schlitz
Name of Contact Person 23 Pedicabs Iv. 图 506 Lucerne Ave Lake Worth FL 33460 City/ State and Zip Code 123 Pedicabs @ gmail.com
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (<u>561</u>) <u>657-9877</u> Area Code & Daytime Telephone Number Brian Schlitz Enclosed is a check for the following amount made payable to the Florida Department of State: **S** \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (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 Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

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123 Pedicans Inc	
	filed with the Florida Dept. of State)
PIV. DOOQL89 (Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>I</i> its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	The new
name must be distinguishable and contain the word "corporation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc." or "Coword "chartered," "professional association," or the abbreviation "I	'o". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	NIA
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	MIN
D. If amending the registered agent and/or registered office address:	
Name of New Registered Agent Brian Schl	
5010 Lucern (Florida stre	et address)
New Registered Office Address: Lake Wor	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w Buan Jalan Signature of New Re	

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: \underline{X} Change	<u>PT</u>	John Doc	
\underline{X} Remove	<u>V</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	\angle	Staci Bolanowski	18620 Ocean Mist Dr Bora Raton FL 33460
Add			Bora Raton FL 33460
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

E. If amending or adding add (Attach additional sheets, if	itional Articles, enter necessary). (Be speci	change(s) here: fic)			
NIA			<u> </u>		
(33,1)	 				
					_
			·		
If an amendment provides	for an exchange, recla	assification, or car	ncellation of issue	ed shares,	
provisions for implementi (if not applicable, indi	rate NIA)	iot contained in ti	ne amendment tt	seir:	
NIA					
			_		
		····	 		

The date of each amendment(s) adoption: $6/1/17$, if other than the
date this document was signed.	
Effective date <u>if applicable</u> :	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this document's effective date on the Department of State's records.	date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendmen by the shareholders was/were sufficient for approval.	t(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following states must be separately provided for each voting group entitled to vote separately on the amendment(s):	nent
"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 sharehol action was not required.	der
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 1015/17 Signature Buch Saletily	
Signature Brien Selection	
(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 co appointed fiduciary by that fiduciary)	urt
Brian Schlitz (Typed or printed name of person signing)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	