P16000045300

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(Ad	dress)	
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(Cit	ty/State/Zip/Phon	e #)
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(27er)

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: PMI Holdings 1, Ir	nc.2	
DOCUMENT NU	MBER: P16000045300		
	es of Amendment and fee are su	bmitted for filing.	
Please return all cor	respondence concerning this ma	tter to the following:	
	David Ederer		
		Name of Contact Person	1
	Verocity, LLC		
		Firm/ Company	
	9086 Castle Harbour Circle		
		Address	
	Vero Beach, FL 32963		
		City/ State and Zip Code	e
ver	ocity@outlook.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informate	tion concerning this matter, pleas	se call:	
David Ederer		at (234-3118
Nam	ne of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
A D P	failing Address mendment Section ivision of Corporations O. Box 6327 allahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of State) P16000045300 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following abundments its Articles of Incorporation: A. If amending name, enter the new name of the corporation: PMH Holdings 2, Inc. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the Professional association, "or the abbreviation "P.A." Neur Principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) D. If amending the registered agent and/or registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent: Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.	PMI Holdings 1, Inc.2	
(Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following alignment(s its Articles of Incorporation: A. If amending name, enter the new name of the corporation: PMI Holdings 2, Inc. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the Observation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc." or "Co". A professional corporation name must typical dig word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) Florida (Zip Code) New Registered Agent's Signature, if changing Registered Agent:	(Name of Corporation as cu	irrently filed with the Florida Dept. of State)
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following about ments its Articles of Incorporation: A. If amending name, enter the new name of the corporation: PMI Holdings 2, Inc. name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the Observation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must replain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable; (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailling address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:	P16000045300	
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D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) New Registered Agent's Signature, if changing Registered Agent:)
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(Florida street address) New Registered Office Address:	new registered agent and/or the new registered office a	duress:
New Registered Office Address:, Florida	Name of New Registered Agent	
New Registered Office Address:, Florida	(File	wide street address)
(City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:		,
New Registered Agent's Signature, if changing Registered Agent:	New Registered Office Address:	
Signature of New Pagistaved Agent if changing	<u></u>	

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 Do	<u>oe</u>		
X Remove	<u>v</u>	Mike Jo	ne <u>s</u>		
X Add	<u>sv</u>	Sally Sr	<u>nith</u>		
Type of Action (Check One)	Title		Name	<u>Addres</u> s	
1) Change		_			
Add				· · · · · · · · · · · · · · · · · · ·	
Remove					
2) Change					
Add					
				-	
Remove				-	
3) Change		_	·		
Add				<u> </u>	
Remove					
4) Change					
Add					
Remove					
5) Change			*****	·	
Add					
Remove					
6) Change					
Change Add		_			
Remove					
remove					

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
· ·	
f an amendment provides for an exch	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
or implementing the ame (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
	- · · · · ·
	
· · · ·	

The date of each amendment(s date this document was signed.) adoption:	, if other than the
	une 19, 2016	
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more inan 90 aays after amenament fite date)	
Note: If the date inserted in the document's effective date on the	is 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)	(CHECK ONE)	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amendment(se sufficient for approval.	;)
	approved by the shareholders through voting groups. The following statemed for each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes c	ast for the amendment(s) was/were sufficient for approval	
by		
•	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholde	r
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
June 19, Dated	2016	
Signature	19/1/C-	
şele	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 cour ointed fiduciary by that fiduciary)	t
	David Ederer	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	