17000041

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COVER LETTER

TO: Amendment Section

Division of Corporat	ions		
NAME OF CORPORAT	TION: P. & P.	Developer	nent Inco
DOCUMENT NUMBER	1: <u>P17000000</u>	4.14	
The enclosed Articles of A	Amendment and fee are su	bmitted for filing.	
Please return all correspor	ndence concerning this ma	tter to the following:	
_	Kell.	PayNe_ Name of Contact Person	1
	(05: 01.)	Firm/ Company	
	6801 SW	36+1/2 (0) Address	urt
Y	Miramar	. FL 330	urt 0 2 3
		City/ State and Zip Code	:
	E-mail address. (to be us	bucket of future annual report	notification)
For further information co	oncerning this matter, pleas	se call:	
Kel Payne Name of C	Contact Person	at (<u>786</u> Area Co	de & Daytime Telephone Number
		payable to the Florida Depa	
□ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	Address nent Section		Address ment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment Articles of Incorporation (Name of Corporation as currently filed with the Florida Dept. of State) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain 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 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 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: . Florida 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

address of each Officer (Attach additional sheets Please note the officer/d P = President; V = Vice Executive Officer; CFO held. President, Treasur Changes should be noted a change, Mike Jones le Mike Jones, V as Remov	and/or I s, if neces, irector titl Presiden = Chief er, Direct d in the fo aves the c	Director being addisory) le by the first lette t: T= Treasurer Financial Officer. or would be PTD. ollowing manner corporation, Sally	ded: r of the office S= Secretary; If an officer. Currently Joh Smith is name	title: D= Director; TR= /director holds more n Doe is listed as the	Trustee : than : e PST (etor being removed and e; C = Chairman or Cler one title, list the first lett and Mike Jones is listed a ld be noted as John Doe,	rk; CEO = Chic ter of each offic as the V. There	èf ce is
Example: XChange	<u>PT</u>	John Doe						1
X Remove	<u>v</u>	Mike Jones						1
X Add	<u>sv</u>	Sally Smith						l
Type of Action (Check One)	<u>Title</u>	Name		^		<u>ddres</u> s	'	
1) Change	S	_ <u>Ba</u>	((Y)	Robinson	<u>3</u>	37 West La liramar, FC	ake Miran	nar Circle
Add			1		<u>17</u>	liramac, FL	-	
Remove					3	3023		i
2) Change	5	_ Ty	rice	Symone	te_	2472 NU	<u>u. 817</u>	errace
X Add		·		,		Miamijt	-	·
Remove					_	33147		
3) Change	-			· · · · · · · · · · · · · · · · · · ·	_		· ;	
Add							- 	ŀ
Remove								
4) Change								
Add					_	··· -	<u> </u>	
Remove					_			
5) Change								
Add								
Remove					_			
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	ding additional Articles, enter change(s) here: heets, if necessary). (Be specific)	
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		······································
	provides for an exchange, reclassification, or cancellation of issued sha	ares,
provisions for imp	plementing the amendment if not contained in the amendment itself:	
provisions for imp	plementing the amendment if not contained in the amendment itself: tble, indicate N/A)	
provisions for imp		

The date of each amendment(s) adoption:	_, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	1
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ 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	1
by"	
(voting group)	1
☐ 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)
(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 court	
appointed fiduciary by that fiduciary)	
Kel Payme	
(Typed or printed name of person signing)	
President	
(Title of person signing)	