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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: Pascal Legacy Gro	up Inc.	
DOCUMENT NUME			
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corres	pondence concerning this ma	tter to the following:	
	Darrian Pascal		
		Name of Contact Person	1
	Pascal Legacy Group Inc		
		Firm/ Company	
	14695 NE 18th Ave		
	-	Address	
	North Miami, FL33161		
	•	City/ State and Zip Code	e
realas	sistantid@gmail.com		
-	E-mail address: (to be us	sed for future annual report	notification)
For further information	n concerning this matter, pleas		
Name (of Contact Person	at ()de & Daytime Telephone Number
	r the following amount made		
S35 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, 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

FILES

2017 DEC -4 PM 3: 44

Pascal Legacy Group Inc.		
(Name of Corporatio	n as currently filed with the Florida Dept. of State)	
P17000018082		
(Docume	ent Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida its Articles of Incorporation:	Statutes, this Florida Profit Corporation adopts the following a	mendment(s)
A. If amending name, enter the new name of the cor	poration:	
	<i>Ti</i>	he new
	"corporation," "company," or "incorporated" or the abbr ""Inc," or "Co". A professional corporation name must con	reviation
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADD)		
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	0	
D. If amending the registered agent and/or registered new registered agent and/or the new registered of		
Name of New Registered Agent		
	(Florida street address)	
	,	
New Registered Office Address:	(City), Florida, Florida	
	1-7	-7
New Registered Agent's Signature, if changing Registereby accept the appointment as registered agent. I	stered Agent: am familiar with and accept the obligations of the position.	
<u></u>		
Signa	ture of New Registered Agent, if changing	

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.

X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) Change	MGR	_	John L. Wilkerson	418 NW Sunview Way
Add				Port Saint Lucie, FL 34986
X Remove				
2) Change		_		
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change	·	_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add		_		
Remove				

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

TD 1	August 1, 2017	
The date of each amendment(s date this document was signed.) adoption:	, if other than the
	eptember 30, 2017	
Effective date <u>if applicable</u> : _	(no more than 90 days after amendment file 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 date Department of State's records.	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(s) sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	t
"The number of votes of	ast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	
☐ The amendment(s) was/were action was not required.	adopted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were action was not required.	adopted by the incorporators without shareholder action and shareholder	
August Dated	1, 2017	
Signature	All on elle	
selo	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 court ointed fiduciary by that fiduciary)	
	John L. Wilkerson	
	(Typed or printed name of person signing)	
	MGR	
	(Title of person signing)	