PM000093841

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: PEARUP, INC				
DOCUMENT NUMI	BER: P17000093841				
	of Amendment and fee are sub	omitted for filing.			
Please return all corres	spondence concerning this mat	ter to the following:			
	David Spiegel				
	Name of Contact Person				
-	PearUp, Inc.		<u> </u>		
		Firm/ Company			
	25 Union Square West C3-01	IAA			
	Address				
	New York, NY 10003		·		
		City/ State and Zip Code	2 .		
david	laspiegel@yahoo.com				
	E-mail address: (to be us	ed for future annual report	notification)		
For further information	on concerning this matter, pleas	e call:			
David Spiegel		at (<u>786</u>	2819161		
Name	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	or 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)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327		Ameno Divisio	Address Iment Section on of Corporations 1 Building		

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

PEARUP, INC.	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P17000093841	
(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 "Cover word "chartered," "professional association," or the abbreviation "I	Co". A professional corporation name must contain the
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)	DEC 2
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address:	ess in Florida, enter the name of the
Name of New Registered Agent	
(Florida stre	net address)
(Filman Sue	
New Registered Office Address:	(Ciry) (Zip Code)
	•
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w	with and accept the obligations of the position.
Signature of New R	egistered 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	PT	John Doe		
X Remove	<u>V</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) X Change	SC	Lonnie Richardson	690 Lincoln Rd.	
Add			Suite 204	
Remove			Miami Beach, FL 33139	
2) X Change	CEO,P	David Spiegel	9 Island Ave	
Add			Apt 2303	
Remove			Miami Beach, FL 33139	
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change	-			
Add				
Remove				
6) Change			·	
Add				
Add				
Kemove				

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

. 12/14/2017	
The date of each amendment(s) adoption: date this document was signed.	, if other than the
12/14/2017	
Effective date if applicable: (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 date w document's effective date on the Department of State's records.	ill 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 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 east for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
☐ 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.	
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)	
David Spiegel	
(Typed or printed name of person signing)	- —
CEO, P	
(Title of person signing)	<u></u>