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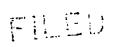
## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: ALL PRO PDR O	F THE EMERALD COAS	T. INC.			
DOCUMENT NUMI	P17000097919					
The enclosed Articles	of Amendment and fee are st	ibmitted for filing.				
Please return all corre	spondence concerning this ma	itter to the following:				
	Processing Department					
	Name of Contact Person					
	My Corporation Business Services, Inc.					
		Firm/ Company				
	26025 Mureau Rd, Ste 120					
		Address				
	Calabasas, CA 91302					
	City/ State and Zip Code					
For further informatio	E-mail address: (to be un	sed for future annual report se call:	notification)			
Processing Department		at ( 877	de & Daytime Telephone Number			
Name of Contact Person		Area Co	de & Daytime Telephone Number			
Enclosed is a check to	or the following amount made	payable to the Florida Depa	artment of State;			
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 Tallahassec, FL 32314		Amenc Divisio Clifton	Address Iment Section on of Corporations Building Executive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



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ALL PRO PDR OF THE EMERALD COAST, INC.

(Name of Corporation as curren	tly filed with the Floridardept fof Stale   12 25
P17000097919	Coro time a
(Document Number	of Corporation (if known)
ursuant to the provisions of section 607,1006, Florida Statutes, this Articles of Incorporation:	is Florida Profit Corporation adopts the following amendments
If amending name, enter the new name of the corporation;	
	The new
me must be distinguishable and contain the word "corporat [orp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or ord "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
Enter new principal office address, if applicable:	214 CASPER DRIVE
rincipal office address <u>MUST BE A STREET ADDRESS</u> )	FORT WALTON BEACH, FL 32547
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
<u>,,,,,,,,,,,,,,,,,,</u>	
	<del></del>
If amending the registered agent and/or registered office ad new registered agent and/or the new registered of fice addre	
	<u>ss.</u>
Name of New Registered Agent	
471.	street address)
(Ptoriui )	street taatress)
New Registered Office Address:	, Florida
New Registered Office Address:	. Florida
w Registered Agent's Signature, if changing Registered Ager	
erchy accept the appointment as registered agent. I am familia	r with and accept the obligations of the position.
Signature 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.

E <b>xample:</b> - <u>X</u> Change	<u>PT</u>	John Doc	
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
E) Change	DPST	Kyle Jandran	134 Monahan Drive
Add			FORT WALTON BEACH, FL 32547
X Remove			
2) Change	DPST	Korey Jandran	214 Casper Drive
XAdd			Fort Walton Beach, FL 32547
Remove			
3 r Change			
Add			
Remove			
4)Change		_	
Add			
Remove			
51 Change			
Add			
Remove			
6) Change			
Add			
Remove			

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

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)	
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.	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 east 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	
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.	
Dated5/14/19 Signature ##	
Signature	
signature  Defined 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)	
Korey Jandran	
(Typed or printed name of person signing)	
President	
(Title of person signing)	<del></del>