# P19000040359

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05/22/19--01018--003 \*\*35.63

Amend

JUN 1 L 2019

### **COVER LETTER**

TO: Amendment Sect Division of Corp					
NAME OF CORPOR	RATION: Pan Exotics Corp.				
DOCUMENT NUM	BER: P19000040359				
	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this mat	tter to the following:			
	Oksana Gray				
		Name of Contact Person			
	Pan Exotics Corp.				
	Firm/ Company				
	31513 SW 208 CT				
		Address			
	Homestead FL 33030				
		City/ State and Zip Code	<b>:</b>		
oksa	nagray4@gmail.com				
	E-mail address: (to be us	sed for luture annual report	notification)		
For further informatic	on concerning this matter, pleas	se call:			
Oksana Gray		at (	474-5913		
Name	of Contact Person	Area Coo	de & Daytime Telephone Number		
Enclosed is a check for	or the following amount made	payable to the Florida Depa	rtment 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

#### Street Address

Amendment Section Division of Corporations Clifton Building

#### Articles of Amendment to Articles of Incorporation of

Pan Exotics Corp.	
(Name of Corporation	n as currently filed with the Florida Dept. of State)
P19000040359	
(Docum	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 amendment(s) to
A. If amending name, enter the new name of the con	poration:
	The new
	"corporation," "company," or "incorporated" or the abbreviation "Inc." or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	
(Principal office address <u>MUST BE A STREET ADD</u>	RESS)
C. Enter new mailing address, if applicable:	22
(Mailing address <u>MAY BE A POST OFFICE BOX</u>	
	SALE OF THE SALE O
<ul> <li>If amending the registered agent and/or registered new registered agent and/or the new registered of</li> </ul>	
new registered agent and/or the new registered of	mee address.
Name of New Registered Agent	
<u></u>	
	(Florida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
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.
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.

Example: X Change	<u>PT</u>	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>	Address
1) Change	D	Oksana Gray	16935 SW 93 ST APT 1-310
X Add			MIAMI. FL 33196
Remove			
2) Change			
Add			
Remove			
3)Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			

If amending or adding additional Arti Attach additional sheets, if necessary).				
				··
		<del></del>		
			<u> </u>	
f an amendment provides for an exch provisions for implementing the ame	ange, reclassificatio	on, or cancellation o	of issued shares,	
(if not applicable, indicate N/A)	nament ii not contai	ined in the amendm	ient usen:	
	<u> </u>			
	<del> </del>		<u> </u>	
		-		· · · ·

The date of each amendment(s	5/21/2019	, if other than the
date this document was signed.		
5 Effective date <u>if applicable</u> :	/21/2019	
	(no more than 90 days after amendment fil	e date)
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing required Department of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes east for t sufficient for approval.	he amendment(s)
	approved by the shareholders through voting groups. The for each voting group entitled to vote separately on the ame	
"The number of votes ca	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.	idopted by the incorporators without shareholder action and	shareholder
5/20/20	9	
Dated	0/1/ 1	
Signature	000	
selec	a director, president or other officer – if directors or officers eted, by an incorporator – if in the hands of a receiver, trusto binted fiduciary by that fiduciary)	
	Oksana Gray	
	(Typed or printed name of person signing)	<del> </del>
	Director	
	(Title of person signing)	