P95000089734

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C. LEWIS MAY 23 2014 EXAMPLER

COVER LETTER

TO: Amendment Section

Division of Corp	orations		
NAME OF CORPO	RATION: PBOC, Inc.		
Will of com o	_{BER:} P9500008973	4	
DOCUMENT NUM	BER: 1 300000007 0		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Brad Bleefeld		
		Name of Contact Person	n
	PBOC, Inc.		
		Firm/ Company	
	777 S. Flagler Dr	., Suite 600E	
		Address	
	West Palm Beach	n, FL 33401	
		City/ State and Zip Cod	e
kw	aas@beachcap.ne	et	
		sed for future annual report	notification)
For further information	n concerning this matter, pleas	se call:	
Brad Bleefel	d	at (561	, 514-3910
Name	of Contact Person		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)
	iling Address		Address
	endment Section ision of Corporations		Iment Section on of Corporations
P.O. Box 6327		Clifton Building	
Tall	lahassec, FL 32314		executive Center Circle assee, FL 32301
		i allana	155CC, 1 L J 2 J U I



Articles of Amendment to Articles of Incorporation of

14 MAY 13 PM 2: 35

SECRETARY OF CLAFE TALLAHASSET, FLORIDA

PBOC, Inc.		TALL AHA!	PSEELFLORIDA
(Name of Corporation as cu	rrently filed with the Flo	rida Dept. of State)	_
P95000089734			_
(Document N	Jumber of Corporation (if I	known)	
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	06, Florida Statutes, this F	lorida Profit Corporation adopts the followin	g amendment(s) to
A. If amending name, enter the new name	of the corporation:		
N/A			The new
name must be distinguishable and contain "Corp.," "Inc" or Co.," or the designation word "chartered," "professional association	on "Corp," "Inc," or "C		bbreviation
B. Enter new principal office address, if a	pplicable:	N/A	
(Principal office address MUST BE A STRI			_
			-
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OF)		N/A	_
			_
D. If amending the registered agent and/o new registered agent and/or the new re		ss in Florida, enter the name of the	_
Name of New Registered Agent	I/A	.	
	(Florida stree	t address)	
New Registered Office Address:		, Florida	_
	(City)	(Zip Code)	
New Registered Agent's Signature, if chan I hereby accept the appointment as registered		th and accept the obligations of the position.	
Signa	ture of New Registered Ag	ent, 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 <math>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>	<u>Addres</u> s
1) Change	D	Joseph Greenfield	333 Sunset Ave. Apt 205
✓ Add			Palm Beach, FL 33480
Remove			
2) Charren			
2) Change			
Add			
Remove			-
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change		_	
Add			
Remove			

E. If amending or adding additional Art	icles, enter change(s) here:	
(Attach additional sheets, if necessary).	(Be specific)	
N/A		
 .		
		- · · · - · · · · · · · · · · · · · · ·
		-
		-
F. If an amendment provides for an exchaprovisions for implementing the ame (if not applicable, indicate N/A) N/A	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:	



14 MAY 13 FM 2: 35 if other than the The date of each amendment(s) adoption: SECRETARY OF GRALL TALLAHASSEE, FLORIDA date this document was signed. Effective date if applicable: (no more than 90 days after amendment file date) 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 cast for the amendment(s) was/were sufficient for approval (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. _{Dated} May 7, 2014 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)

(Typed or printed name of person signing)

(Title of person signing)

Brad Bleefeld

Vice President