## 97MM36498

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## COVER LETTER

TO: Amendment Sec Division of Corp			
NAME OF CORPO	RATION: Palm Beach Frame	makers Inc	
	BER:		
The enclosed Articles	of Amendment and fee are su	bmitted for filing.	
Please return all corre	espondence concerning this ma	iter to the following:	•
	Amanda Mackey		
		Name of Contact Persor	1
	PBAF, LLC		
	· · · · · · · · · · · · · · · · · · ·	Firm/ Company	
	245 Sunrise Avenue		
		Address	
	Palm Beach, FL 33480		
		City/ State and Zip Code	,
		City citate and zap cool	ı
amar	nda@moensrealestate.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informatic	on concerning this matter, pleas	se call:	
Amanda Mackey		at ( <u>561</u>	) 655-5510 de & Daytime Telephone Number
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	ertment 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)
Am Div P.C	illing Address endment Section rision of Corporations b. Box 6327 luhassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section n of Corporations Building xecutive Center Circle assee, FL 32301

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## Articles of Amendment to Articles of Incorporation of

raim Beach Pramemakers, Inc.			
( <u>Name</u>	of Corporation as currently filed with the	Florida Dept. of State)	
P97000036498			
	(Document Number of Corporation (if I	known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	7.1006, Florida Statutes, this <i>Florida Profit Co</i>	orporation adopts the following amendr	nent(
A. If amending name, enter the new n	ame of the corporation:		
•			
name must be distinguishable and cor "Corp.," "Inc.," or Co.," or the desig, vord "chartered," "professional associa	ntain the word "corporation," "company," nation "Corp," "Inc," or "Go". A professi- ution," or the abbreviation "P.A."	The ne or "incorporated" or the abbreviation onal corporation name must contain to	on
B. Enter new principal office address,		<u> </u>	20
Principal office address <u>MUST BE A S</u>	STREET ADDRESS )		<u>19</u>
	-		90
		ئ <u>ن</u> العام ا	2
2. Enter new mailing address, if appl	icable:		_
(Mailing address MAY BE A POST	OFFICE BOX)		ž
		ur ∪s mr; ml	ယ္
			. 9
	<del></del> -		
<ol> <li>If amending the registered agent at new registered agent and/or the ne</li> </ol>	nd/or registered office address in Florida, e	ater the name of the	
	Ronald S Kochman		
Name of New Registered Agent	Notation of Notation		
	222 Lakeview Ave, Ste 1500	•	
	(Florida street address)		
New Registered Office Address;	West Palm Beach	, Florida 33401	
-	(City)	(Zip Code)	
lew Registered Agent's Signature, if c	hanging Registered Agent: tered agent. I am familiar with and accept th	a abligations of the position	
na esy weeep the appointment as regim	ered agent. Tampaminar with and accept the	e conganons of the position.	
		<del></del> -	
	(	,	
	Signature of New Registered Agent, i	f changing .	

address of each Office (Attach additional shee, Please note the officer/c P = President; V = Vice Executive Officer; CFC held. President. Treasu Changes should be note a change, Mike Jones le Mike Jones, V as Remo	r and/or D ts. if necess director titl e President ) = Chief I rer. Directo ed in the for	irector being added: [ary] [ary] [by the first letter of the office title: [c]	h officer/director being removed and title, name, and
Example: X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	$\underline{SV}$	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	PST	Jineen Cronin	183 North County Road
Add			Palm Beach, FL 33480
X Remove			
2) Change	VP	Jovin Cronin-Wilesmith	8918 Burton Way, Aot 2
Add			Beverly Hills, CA 90211
X Remove			<u> </u>
3 ) Change	PVST	PBAF LLC	222 Lakeview Ave. Ste 15(X)
XAdd			West Palm Beach, FL 33401
Remove			
4) Change		_	
Add			<u> </u>
Remove			
5) Change			
Add			
Remove			
6) Change			!
Add			<del></del>
Remove			<u></u>

If amending or adding additional Articles, enter change(s) Attach additional sheets, if necessary). (Be specific)	<u>) here</u> :
	<u> </u>
	<del></del>
	_
· · · · · · · · · · · · · · · · · · ·	
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f an amendment provides for an exchange, reclassification	n or cancellation of iccurd charge
provisions for implementing the amendment if not contain	ned in the amendment itself:
(if not applicable, indicate NA)	
	<del>-</del>
	1
	1

	August 19, 2019	
The date of each amendment(s) ado date this document was signed.	ption:	, if other than the
Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file	e date)
Note: If the date inserted in this blo document's effective date on the Depa	ck does not meet the applicable statutory filing requir rtment 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 adopt by the shareholders was/were suffi	ed by the shareholders. The number of votes east for the cient for approval.	ne amendment(s)
	ved by the shareholders through voting groups. The for the voting group entitled to vote separately on the amer	
	r the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were adopt action was not required.	ed by the board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were adopt action was not required.	ed by the incorporators without shareholder action and	shareholder
Dated 8	20/19	
Signature	manda Machey	
(By a dire	ctor, president or other Wicer – if directors or officers	
	by an incorporator – it in the hands of a receiver, truste I fiduciary by that fiduciary)	e, or other court
2	(Typed or printed name of person signing)	<del> </del>
_	Manager of PBAF, LLC (Title of person signing)	_ //