527188

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	PCS ENT., INC		
DOCUMENT NUMBER:	S27188		
The enclosed Articles of Amend	ment and fee are su	bmitted for filing.	
Please return all correspondence	concerning this ma	tter to the following:	
Ardyce B	lohm		
·*		Name of Contact Person	1
PCS ENT	., INC.		
		Firm/ Company	
7401 Wile	es Rd, Ste 337		
		Address	
Coral Spr	ings FL 33067		
· 		City/ State and Zip Code	e
ardycejane@gп	ail.com		
		sed for future annual report	notification)
	, , , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·	,
For further information concerni	ng this matter, pleas	se call:	
Frank Blohm		954 at (753-8110
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for the follow	wing amount made	payable to the Florida Depa	artment of State:
-	3.75 Filing Fee & tificate 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		Amend Divisio Clifton	Address Iment Section on of Corporations Building
Tallahassee, FL 32314		2661 Executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

PCS ENT., INC

(Name of Corporation as curren	ntly filed with the Florida Dept. of State)
S27188	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s) t
A. If amending name, enter the new name of the corporation:	
name must be distinguishable and contain the word "corporat "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	7401 Wiles Rd
(Principal office address MUST BE A STREET ADDRESS)	Ste 337
	Coral Springs FL 33067
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7401 Wiles Rd
	Ste 337
	Coral Springs FL 33067
D. If amending the registered agent and/or registered office adnew registered agent and/or the new registered office addresses	
Name of New Registered Agent	
(Florida .	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Age	(City) (Zip Code)
I hereby accept the appointment as registered agent. I am familia	
Signature of New	Revistered 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:	, или эиг	ty Smith, SV as an Ada.	
X Change	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			 .
Remove			. <u></u>

	(Be specific)
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an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
f an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	nange, reclassification, or cancellation of issued shares, and and an analysis
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provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and ment if not contained in the amendment itself:

May 15, 2019
The date of each amendment(s) adoption:, if other than the
date this document was signed.
May 15, 2019 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 not be listed as the document's effective date on the Department of State's records.
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
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.
May 8, 2019
Signature Row SUL
(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)
Frank M. Blohm
(Typed or printed name of person signing)
President
(Title of person signing)