## P19000005434

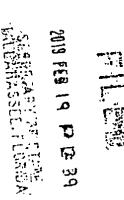
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## COVER LETTER.

TO: Amendment Section

. Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPORATION: Victor Mendoza Construction INC. DOCUMENT NUMBER: P19000005434 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Victor Manuel Mendoza Fonseca Name of Contact Person Victor Mendoza Construction Inc Firm/ Company 6173 Oak Cluster Cir. Address Tampa, FL 33634 City/ State and Zip Code vitico91@icloud.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ( 813 ) 850-9361

Area Code & Daytime Telephone Number Victor Mendoza Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$52.50 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & S35 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy (Additional Copy enclosed) is enclosed) Street Address **Mailing Address** Amendment Section Amendment Section Division of Corporations Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation

of

Victor Mendoza Construction	The state of the s
(Name of Corporation as curre	ently filed with the Florida Dept. of State)
P19000005434	ለበነበ ድርክ ነው ያማ እን
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, t is Articles of Incorporation:	his Florida Profit Corporation adopts he following amendment
A. If amending name, enter the new name of the corporation,	<u> </u>
	The new
name must be distinguishable and contain the word "corpore "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," o word "chartered," "professional association," or the abbreviatio	ation," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the
D. Catar non-aringinal office address if applicables	NA
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	, , , ,
er er a state de Wastellande.	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NIA
·	
D. If amending the registered agent and/or registered office a	ddress in Florida, enter the name of the
new registered agent and/or the new registered office addr	
Name of New Registered Agent	
(Floride	a street address)
	rs - : t
New Registered Office Address:	(City) , Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Ag	
hereby accept the appointment as registered agent. I am famili	ar with and accept the obligations of the position.
Signature of Ne	w 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, a address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Remove

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 = Ch. Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each officed. 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 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 Chang 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) X Change	P	Victor Manuel Mendoza Fonseca	6173 Oak Cluster Cir Tampa, FL
Add			33634
Remove			
2) Change	7	Victor Mendoza	10173 Oak Clush ( Gr - Lampa, F)
Add			33634
Remove			
3 ) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			

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provisions for implementing the an	nendment if not con	tion, or cancellation	of issued shares, ment itself:	
an amendment provides for an exprovisions for implementing the ar (if not applicable, indicate N/A)	nendment if not con	tion, or cancellation tained in the amend	of issued shares, ment itself:	
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provisions for implementing the an	nendment if not con	ition, or cancellation	of issued shares, ment itself:	
f an amendment provides for an ex provisions for implementing the ar (if not applicable, indicate N/A)	nendment if not con	ition, or cancellation	of issued shares, ment itself:	
provisions for implementing the an	nendment if not con	ition, or cancellation	of issued shares, ment itself:	

The date of each amendment(s) adoption:	, if other the
date this document was signed.	
02/18/2019	
Effective date if applicable:	(no more than 90 days after amendment file date)
	(no more man 50 days after amenanem file date)
Note: If the date inserted in this block does redocument's effective date on the Department of	not meet the applicable statutory filing requirements, this date will not be listed a State's records.
Adoption of Amendment(s) ( <u>CH</u>	HECK ONE)
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a	shareholders. The number of votes east for the amendment(s) approval.
	ne shareholders through voting groups. The following statement g group entitled to vote separately on the amendment(s):
"The number of votes cast for the amer	ndment(s) was/were sufficient for approval
by	ting group)
(vo.	ting group)
action was not required.  The amendment(s) was/were adopted by the	board of directors without shareholder action and shareholder incorporators without shareholder action and shareholder
action was not required.	
Dated 2/15/19 Signature 4-6-6	
.sated	
Signature #	
(By a director, pres	orporator – if in the hands of a receiver, trustee, or other court
V	ictor M. Mendoza Fonseca
	(Typed or printed name of person signing)
	President
<del></del>	(Title of person signing)