168973

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13 SEP -3 PM 12: 44

SEP 12 2013 T. CARTER

COVER LETTER

TO: Amendment Section Division of Corporations

> P.O. Box 6327 Tallahassee, FL 32314

NAME OF CORPORATION: Deca Sales of Florida, Inc.					
DOCUMENT NUMBER:					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Salvador Cimino Name of Contact Person Deca Sales of Florida, Inc. Firm/ Company					
2720 N. 36th Street Address					
Tampa, Florida, 33605 City/State and Zip Code Dominic & Baccare//zlaw.Com E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Salvador Cimino at (813) 376-9433 Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
\$35 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional Copy is enclosed) Certified Copy (Additional Copy is enclosed)					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building					

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation FILED SECRETARY OF STATE TALLAPASSEE, FLORIDA

13 SEP -3 PM 12: 44

to

Veca Sales of Florida,	Inc.
(Name of Corporation as currently filed with the	Florida Dept. of State)
L68973	
(Document Number of Corporation	(if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
West Coast Associates of Ta	im Da, Inc, The new
West Coast Associates of Taname must be distinguishable and contain the word "corporati "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: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	2720 N. 36th Street
(Trinopal oggice www.ess <u>incor DD in Grandal in DD indo</u>)	Tampa, FL 33605
	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Same
D. If amending the registered agent and/or registered office adenew registered agent and/or the new registered office address	
Name of New Registered Agent	
(Fl.:: J	Accept additional
(rionau s	treet address)
New Registered Office Address: (City	, Florida
(Cit)	у) (Др Соце)
New Registered Agent's Signature, if changing Registered Agen I hereby accept the appointment as registered agent. I am familiar	
Signature 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	<u>.</u>				
X Remove	$\underline{\mathbf{V}}$	Mike Jones					
X Add	<u>sv</u>	Sally Sm	<u>ith</u>				
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	. 1	<u>Addres</u> s		
1) Change				N/A			
Add							
Remove							
2) Change		<u> </u>					
Add							
Remove							
3)Change							
Add							
Remove							
4) Change							
Adđ							
Remove							
5) Change							
Add		_					
Remove							
6) Change		_					
Add							
Remove							

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)
Change Name back to original name of,
Change Name back to original name of, West Coast Associates of Tampa, Inc.
•

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)
N/H

The date of each amendment(s) adoption: 26, August 2013 date this document was signed.	, if other than the
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	
by	
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	_
(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)	
DORIS E. CIMINO	_
(Typed or printed name of person signing)	