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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION:FLORIDA VICTIM SER	RVICES INC		
N11000011659			
DOCUMENT NUMBER:			
The enclosed Articles of Amendment and fee are submitted	d for filing.		
Please return all correspondence concerning this matter to	the following:		
OSCAR GUERRERO			
(Nar	me of Contact Per	son)	
FLORIDA VICTIM SERVICES INC			
	(Firm/ Company)	<u> </u>	
1521 ALTON ROAD Suite 791			•
	(Address)		
MIAMI BEACH, FL 33139			
(City	y/ State and Zip C	ode)	
floridavictimservicesinc@gmail.com			
E-mail address: (to be used for t	future annual repo	rt notification)
For further information concerning this matter, please call:	•		
OSCAR GUERRERO	at	786	200-7281
(Name of Contact Person)		(Area Code)	(Daytime Telephone Number)
Enclosed is a check for the following amount made payable	e to the Florida Do	epartment of S	State:
·(A	13.75 Filing Fee & crified Copy additional copy is nelosed)	Certifi Certifi	Filing Fee cate of Status ed Copy ional Copy is sed)

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 **Street Address**

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FLORIDA VICTIM SERVICES INC

(Name of Corporation as curre	ently filed with the Florida D	ept. of State)
N11000011659		
(Document Num	nber of Corporation (if known)	© 0C
Pursuant to the provisions of section 617.1006, Florida State amendment(s) to its Articles of Incorporation:	utes, this <i>Florida Not For Prof</i>	it Corporation adopts the following
A. If amending name, enter the new name of the corpora	ation:	Thanew
name must be distinguishable and contain the word "corpor" ("Company" or "Co." may not be used in the name.	ration" or "incorporated" or t	he abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	1521 ALTON ROAD	
(Principal office address <u>MUST BE A STREET ADDRES.</u>	<u>S)</u> SUITE 791	
	MIAMI BEACH, FL 33139)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1521 ALTON ROAD	
·	SUITE 791	•
	MIAMI BEACH, FL 3313	9
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office	fice address in Florida, enter address:	the name of the
Name of New Registered Agent:		
New Registered Office Address:	(Florida st	rees address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am J		ligations of the position.
	Signature of New Registered A	gent, 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 X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Doe Mike Jones Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	<u>Addres</u> s
1) Change	PRES	GUADALUPE VARGAS	7800 RED ROAD #215
Add			MIAMI FL 33143
X Remove			
2) Change	PRES	OSCAR GUERRERO	1521 ALTON ROAD
X Add			SUITE 215
Remove			MIAMI BEACH, FL 33139
3) Change	VP	ROA, REGULA JR	8305 SW 152 AVE # 417
Add			MIAMI, FL 33193
X Remove			
4) Change	S,T	MARIA A GUTIERREZ	8305 SW 152 AVE # 417
Add			MIAMI, FL 33193
X Remove			
5) Change			
Add			
Remove		· .	
6) Change			
Add			
Remove		.	

C. If amending or adding addition (attach additional sheets, if necessity).	ssary). (Be specific)			
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·				
)
			-	
		<u></u>		
				
			<u></u>	

	this document was signe		, ir other than the
Effe	ective date <u>if applicable</u> :		
		(no more than 90 days after amendment file date)	
Ado	option of Amendment(s)	(CHECK ONE)	
	The amendment(s) was/was/were sufficient for a	were adopted by the members and the number of votes cast for the amendment(s) approval.	
	There are no members of adopted by the board of		
	Dated	10/5/17	
	Signature		
	have	ne chairman or vice chairman of the board, president or other officer-if directors not been selected, by an incorporator – if in the hands of a receiver, trustee, or court appointed fiduciary by that fiduciary)	
	GUADA	LUPE VARGAS	
	- 21 - 121 - 121 - 12	(Typed or printed name of person signing)	
		(Title of person signing)	