Poloco 25100

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				

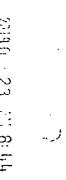
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R. WHITE NOV 1 4 2019



COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: VIZZari Brothers Enterprise In
DOCUMENT NUMBER: POLODO 25100
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person
MCA Accounting Service
12604 Ithaca Aue
Address
Hudson F1 34667
City/ State and Zip Code
E-mail address: (to be used for future almual report notification)
For further information concerning this matter, please call:
Terri Bishop = 1,813,679-1552
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:
S35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) Certificate of Status Certificate of Status Certificate of Status Certificate Opy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

10

to

	Articles of Inco	rporation		
V	. of i.i.		_ 2315 C	23 / 1 8:44
V122ac		ners	Enterp	rise tro
	oration as currently			of State)
	0000 29			
(D	Occument Number of C	Corporation	(if known)	
Pursuant to the provisions of section 607,1006, Fits Articles of Incorporation:	lorida Statutes, this Fi	lorida Profi	t Corporation ado	pts the following amendme
A. If amending name, enter the new name of t	he corporation:			
				The _new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation "Coword "chartered," "professional association," or	Corp." "Inc." or "Ce	o". A profe	e," or "incorpora essional corporati	ited" or the abbreviation on name must contain the
B. Enter new principal office address, if applic	cable:			
(Principal office address <u>MUST BE A STREET</u>	<u>ADDRESS</u>)			
				, -
C. Enter new mailing address, if applicable:				
(Mailing address <u>MAY BE A POST OFFICE</u>	<u>? BOX</u>)			
 If amending the registered agent and/or reg new registered agent and/or the new registered. 	<u>ristered office addres</u> ered office address:	s in Florida	i, enter the name	<u>of the</u>
	red mile address.			
Name of New Registered Agent				<u> </u>
	(Florida street	(address)		
New Registered Office Address:			F	Torida
	<i>(C</i>)	itv9		(Zip Code)
New Registered Agent's Signature, if changing	Registered Agents			
hereby accept the appointment as registered age		h and accep	t the obligations o	f the position.
	Strange of March	/ 1 · (a de la companya de l	
	Signature of New Reg.	ьяетса луен	и, и спандінд	

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> <u>John</u>	<u>1 Doe</u>	
		<u>11700.</u>	
X Remove	<u>V</u> <u>Mik</u>	<u>e Jones</u>	
X Add	<u>SV</u> <u>Sally</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	VP/T	Michael J. Vizza	iri 3316 Parkway Blu
Add			Land 0 Lakes Fl
X Remove			34639
2) 🔏 Change			
Add			
Remove			
3.) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
 -	
an amendment provides for an exch:	ange, reclassification, or cancellation of issued shares,
<u>orovisions for implementing the amen</u> (if not applicable, indicate N/A)	ndment if not contained in the amendment itself:
(i) an apparent marcial march	
	

The date of each amendment(s) adoption: _ date this document was signed.	UCTOBER	1,2019	, if other than th
Effective date <u>if applicable</u> :	(no more than 90 days at	fier amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department of		utory filing requirements, this c	date will not be listed as th
Adoption of Amendment(s) (C	HECK ONE)		
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The number approval.	of votes east for the amendment	.(s)
☐ The amendment(s) was/were approved by t must be separately provided for each votin			sent
"The number of votes cast for the ame	endment(s) was/were sufficie	ent for approval	
by			
(ve	oting group)		
☐ The amendment(s) was/were adopted by the action was not required.	e board of directors without s	shareholder action and sharehold	ler
☐ The amendment(s) was/were adopted by the action was not required.	e incorporators without share	cholder action and shareholder	
Dated 10/18/19			
Signature	D		
(By a director, pre selected, by an inc		rectors or officers have not been f a receiver, trustee, or other cou	
	(Typed or printed name of p	1229 Cl person signing)	
	Presiden	+	
	(Title of person	signing)	