## P03000141589

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## COVER LETTER

TO: Amendment Section Division of Corporations

. .

NAME OF CORPOR	ATION: VAZ, INC.			
DOCUMENT NUMB	ER: P03000141589			
	of Amendment and fee are sul	omitted for filing.		
Please return all corres	pondence concerning this ma	ter to the following:		
	ROBERT E. GUEST			
		Name of Contact Person	)	
	GUEST, PEANY, GUEST CPA'S P.A			
		Firm/ Company		
	759 SW FEDERAL HWY SU	JITE 103		
		Address		
	STUART, FL 34994			
		City/ State and Zip Cod		
	rguest@gpcpa.com			
		ed for future annual report	notification)	
	n concerning this matter, pleas		286-9005	
Name (	of Contact Person	at ( Area Co	de & Daytime Telephone Number	
	r the following amount made			
■ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate 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 Tallahassee, FL 32314		Ameno Divisio The C 2415 l	Address Innent Section on of Corporations centre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303	

## Articles of Amendment to Articles of Incorporation of

VAZ, INC.			
(Name o	of Corporation as currently	filed with the Florida Dep	t. of State) L _ : .
203000141589	(Document Number of Corporation (if known)		
	(Document Number of	Corporation (if known)	- 06 PH 9: 50
	•	7.1	distance -
ursuant to the provisions of section 607. s Articles of Incorporation:	1006, Florida Statutes, this F	lorida Profit Corporation સં	Jobisthe following amendment
. If amending name, enter the new na	ime of the corporation:		
5/A			The new
ame must be distinguishable and contain Inc.," or Co.," or the designation "Cochartered," "professional association,"	lorp," "Inc," or "Co". A		or the abbreviation "Corp.,"
re		N/A	
. Enter new principal office address, Principal office address MUST BE A S			
······································	,		
Enter new mailing address, if appli		N/A	
(Mailing address MAY BE A POST O	OFFICE BOX)		
. If amending the registered agent an		ess in Florida, enter the nar	me of the
new registered agent and/or the new			
Name of New Registered Agent	N/A		
	(Florida stre	et address)	<del></del>
No. 1 Decision of Office Address.			, Florida
New Registered Office Address:		City)	_, riorida (Zip Code)
ew Registered Agent's Signature, if cl	hanging Registered Agent:		
vereby accept the appointment as regist	ered agent. I am familiar w	th and accept the obligation	s of the position.
	Cimmit and CM and D	Internal Grant Colombia	
	signature oj ivew Kej	gistered Agent, if changing	

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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	PT	John Doc	
X Remove	$\underline{V}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	D	ROBIN A. ZINTER	2882 SE FARLEY RD
X Add			PORT SAINT LUCIE, FL 34952
Remove			
2) Change	D	NEDRA S. VELASCO	HI YELLOW BLUFF TRAC
X Add			ST MARY'S, GA 31558
Remove Change			
Add			
Remove			
4) Change			
Add			<del></del>
Remove			
5) Change			
Add			<del></del>
Remove			
6) Change			
Add			4111
Remove			

E. If amending or adding additional Article (Attach additional sheets, if necessary).	(Be specific)
N/A	
	<u> </u>
<del></del>	•
- · ·	
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	the second second second
r. It an amendment provides for an excr provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	
	**************************************
· · · · · · · · · · · · · · · · · · ·	
	<del></del>

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The date of each amendment(s	adoption: <u>N/A</u>	, if other than the
late this document was signed.		
Effective date <u>if applicable</u> : _		
	(no more than 90 days after amendment	file date)
<b>Note:</b> If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing rec Department of State's records.	quirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without	ut shareholder action and shareholder
☐ The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes east for sufficient for approval.	or the amendment(s)
	approved by the shareholders through voting groups. The for each voting group entitled to vote separately on the a	
"The number of votes of	ast for the amendment(s) was/were sufficient for approva	ıl
by		
	(voting group)	-
Signature(By sele	a director, president or other officer – if directors or officeted, by an incorporator – if in the hands of a receiver, traditional fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	)
	PRESIDENT (Title of person signing)	