(((H22000350891 3)))



H220003508913ABC/

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To:

Division of Corporations

Fax Number : (850)617-6380.

From:

Account Name : IP ACCOUNTING GROUP & BUSINESS CONSULTANTS

Account Number : I20170000038

Phone Fax Number : (305)324-2248 : (305)324-4959

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address: JE@ACCOUNTINGGROUP.COMCASTBIZ.NET

COR AMND/RESTATE/CORRECT OR O/D RESIGN VAJOELAN ICE INC.

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October 14, 2022

FLORIDA DEPARTMENT OF STATE
Division of Corporations

VAJOELAN ICE INC. 7933 PANAMA STREET MIRAMAR, FL 33023

SUBJECT: VAJOELAN ICE INC.

REF: P06000138009

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Please mark what action is to be done for the V/P and S.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tammi Cline FAX Aud. #: H22000350891

Regulatory Specialist II Supervisor Letter Number: 522A00023063

TO: Amendment Section

7677 AFT 1 L AM 9:37

COVER LETTER

Division of Corp	orations			
NAME OF CORPOR	RATION:V	'AJOELAN ICE, INC.		
DOCUMENT NUM	BER:P06000138009	9		
The enclosed Articles	of Amendment and fee are st	ibmitted for filing.		
Please return all corre	spondence concerning this ma	atter to the following:		
		IL BUNSTER		
	•	Name of Contact Person		
	IL BUNSTE	R & ASSOCIATES, PA		
	•	Firm/ Company		-
	199 SW 12	TH AVENUE, SUITE 4		
	,	Address		
	MIAM I, FI	33130		
		City/ State and Zip Code	· · · · · · · · · · · · · · · · · · ·	. ,
		tinggroup.comcastbiz.net		
	E-mail address: (to be us	sed for future annual report n	iotification)	
For further information	n concerning this matter, plea	se call:		
		at (305	_)324-2248	
Name o	of Contact Person	Area Code	e & Daytime Telephone Number	•
Enclosed is a check fo	r the following amount made	payable to the Florida Depar	tment of State:	
\$35 Filing Fcc ■	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Maii	Una Address	Strant A	ddynes	

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

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

VAJOELAN ICE, INC. (Name of Corporation as current)	y filed with the Florida Dept. of State	<u> </u>	
· · · · · · · · · · · · · · · · · · ·		:/	
P06000138009 (Document Number of	f Corporation (if known)		
	,		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the t	following amend:	meni(s) to
A. If amouding name, enter the new name of the corporation:			
		The n	
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A "chartered," "professional association," or the abbreviation "P.A."			
• •	7022 04314144 670887)CT	1 [
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	7933 PANAMA STREET		;
(Timoparojjiko anaroso <u>inog visas se začest istances</u>)	MIRAMAR, FL 33023	(2.2	
			إسعا
		် က	. ``
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	7933 PANAMA STREET		_
	MIRAMAR, FL 33023		
D. If amending the registered agent and/or registered office addr new registered agent and/or the new registered office address:			-
Name of New Registered Agent	,		
·			
(Florida stre	et address)		
New Registered Office Address:			
('Ciny)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w		sition.	
Signature of New Re	gistered Agent, if changing		
Check if applicable The amondment(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)

Example:

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.

X Change	<u>PT</u> · <u>Job</u>	nn Doe	•
X Remove	<u>V</u> <u>Mi</u>	ke Jones	
X Add	<u>SV</u> Sal	ly Smith	•
Type of Action (Check One)	Ţítlę	Name	Address
1) Change	<u>T</u>	MARCOS MEDINA	7933 PANAMA STREET
Add	,		MIRAMAR, FL 33023
X Remove			
2) Change	<u>T</u>	SOLRACYTEL DOWNS	7937 PANAMA STREET
<u>X</u> Add			MIRAMAR, FL 33023
Remove 3) Change			
X Add			
Remove			
4) Change			
Aðd			
Remove			and the commence of the contract of the contra
5) Change		·····	
Add			
Remove			
6) Change	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Remove			

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
ARTICLE VII		
The name and address of the officers and board of directors shall read as follows:		
PRESIDENT: MARCOS MEDINA, Located at 7933 Panama Street, Miramar, Fl 33023		····
VICE-PRFESIDENT: YURI RODRIGUEZ, located at 7937 Panama Street, Miramar, FI 33023		
SECRETARY: ANFERNEE MEDINA, Located at 7933 Panama Street, Miramar, FI 33023		
TREASURER: SOLRACYTEL DOWNS, Located at 7937 Panama Street, Miramar, Fl 33023		
	<u></u>	2022
		2022 OCT 1 4
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	- X	P
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		3
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)		
	- 	
		
		
		<u></u> -
		 ,
		_ ·

Oct. 14. 2022 1:30PM IL Bunster	& Associates, PA	No. 0992 P. 7
The date of each amendment(s) adoption:date this document was signed.	OCTOBER 12, 2022	if other than the
Effective date if applicable:	OCTOBER 12, 2022	
	OCTOBER 12, 2022 no more than 90 days after amendment file a	late)
Note: If the date inserted in this block does not a document's effective date on the Department of Sta		nents, this date will not be listed as the
Adoption of Amendment(s) (CHEC	CK ONE)	
The amendment(s) was/were adopted by the inc action was not required.	orporators, or board of directors without sha	reholder action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for app		amendment(s)
☐ 'The amendment(s) was/were approved by the sh must be separately provided for each voting gro		ment(s):
"The number of votes east for the amendu	• •	[= 1] 2022 OCT 14
by(voting	group)	
1.		TIL AM
Dated CTOBER 12,	2022	ب ب
Signature Weding	1	37
(By a director, presider	nt or other officer if directors or officers ha	
selected, by an incorpo	orator if in the hands of a receiver, trustee, that fiduciary)	or other court
	COS MEDINA	
(Ту	ocd or printed name of person signing)	
PRES	DENT	

(Title of person signing)