## P06000150446

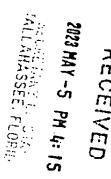
(Re	questor's Name)				
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PICK-UP	☐ WAIT	MAIL			
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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: CRSB SERVICES	CORP	
DOCUMENT NUM	D06000150116		
The enclosed Article	of Amendment and fee are su	abmitted for filing.	
Please return all corre	espondence concerning this ma	atter to the following:	
	JACQUELINE JAIME		
		Name of Contact Person	n
	LEGAL DOCUMENTS SOI	JUTIONS .	
		Firm/ Company	
	415 WEST 29TH ST SUITE	F	
		Address	
	HIALEAH FL 33012		
		City/ State and Zip Cod	e
	info@legaldocumentssolutio	ns.com	
	E-mail address: (to be us	sed for future annual report	notification)
	on concerning this matter, plea		N 1 (1202
JACQUELINE JAIN		at ( <u>305</u>	)
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check f	or the following amount made	payable to the Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
An Div P.C	niling Address nendment Section dision of Corporations D. Box 6327 lahassee, FL 32314	Amend Divisio The C 2415 (	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, Ft. 32303

## Articles of Amendment to Articles of Incorporation of

	011011120122 416.150	
PVSN	SERVICES CORP	

(Name of Corporation as	currently filed with the Florida Dept	t, of State)		
P06000150446				
(Document)	Number of Corporation (if known)	-		
Pursuant to the provisions of section 607,1006, Florida Statits Articles of Incorporation:	utes, this Florida Profit Corporation ac	lopts the following	g amendr	nent(s) t
A. If amending name, enter the new name of the corpor	ration:			
		<del> </del>	The ne	
name must be distinguishable and contain the word "corpor "Inc.," or Co.," or the designation "Corp," "Inc," or "chartered," "professional association," or the abbreviation	"Co". A professional corporation n			
B. Enter new principal office address, if applicable:				_
(Principal office address <u>MUST BE A STREET ADDRES</u>	<u>SS</u> )		023	
	<del></del>		— <b>Ⅲ</b>	
		* 72.7	<b>-</b> ≺	1000
C. Enter new mailing address, if applicable:		*****	9	!
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>		Ш
		mo	ယ္	
			<del></del>	-
		<u> </u>	<u>ω</u>	-
D. If amending the registered agent and/or registered o	Office address in Flavida, enter the par	ne of the		
new registered agent and/or the new registered office		iic or tik		
Name of New Registered Agent				
	Florida street address)			
New Registered Office Address:		, Flo <del>ri</del> da		
	(Cuv)	íZip (	oder	
New Registered Agent's Signature, if changing Register		etalo e se culativa		
I hereby accept the appointment as registered agent. I am	jaminar wim ana accept the ortigation	v of the position		
Signature	of New Registered 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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	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	<u>s</u>	NELSON SALINAS CASTILLO	3081 NW 58TH ST
X Add			MIAMI FL 33142
Remove			
2) Change			
Add			
Remove 3 ) Remove	_		
Add			
Remove			
4) Change			
Add			
Remove			<u> </u>
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheet:	additional Arti s if necessary)	(Be specific)	nge(s) nere:			
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- 10 100	<del></del>				<del>.</del>	
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f an amendment prov	ides for an exch	ange, reclassifi	ication, or can	cellation of issu	red shares,	
provisions for implem (if not applicable,	ienting the ame indicate N/4)	nament 11 not c	<u>contained in tr</u>	<u>ie amendment i</u>	<u>tseir:</u>	
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			<del></del>			
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The date of each amendment(s) date this document was signed.	adoption:	, it other than th
•	AY3, 2023	
Effective date <u>if applicable</u> :		<del></del>
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the I	block does not meet the applicable statutory filing requirements, the Department of State's records.	is date will not be listed as th
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were a action was not required.	lopted by the incorporators, or board of directors without shareholder	action and shareholder
The amendment(s) was/were a by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amenda sufficient for approval.	nent(s)
	oproved by the shareholders through voting groups. The following start each voting group entitled to vote separately on the amendment(s).	uement
"The number of votes car	it for the amendment(s) was/were sufficient for approval	
by CRSV SERVICES C	ORP	
,	(voting group)	
05/02/202 Dated	director, president or other officer if directors or officers have not b	
seteci	ed, by an incorporator - if in the hands of a receiver, trustee, or other intended fiduciary by that fiduciary)	
	SERGIO ARIEL VELAZQUEZ	
	(Typed or printed name of person signing)	
	PSTD	
	(Title of person signing)	· · · · · · · · · · · · · · · · · · ·

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