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Office Use Only



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COVER LETTER

TO: Amendment Section

Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

NAME OF CORPORATION: 0 700077015 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Firm/ Company E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee 43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section **Amendment Section**

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

Articles of Amendment

to Articles of Incorporation

to

	Articles of Incorpora	tion F	ILED
WS Read	of LFSYATE	INC	27 PM 12: 10
(Name of Corporation as curre	ntly filed with the Florida	Dept. of State)	A STATE A
POT	70000 77	015	HARSEE, FLORIBA
(Document Num	ber of Corporation (if know		
Pursuant to the provisions of section 607.1006, I its Articles of Incorporation:	Florida Statutes, this <i>Florida</i>	Profit Corporation adopts t	he following amendment(s
A. If amending name, enter the new name of	the corporation:		
VFA IN	T. INC.		The new
name must be distinguishable and contain the "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association," of	e word "corporation," "c "Corp," "Inc," or "Co".	ompany," or "incorporated A professional corporation i	" or the abbreviation name must contain the
B. Enter new principal office address, if appl (Principal office address <u>MUST BE A STREET</u>		A 1- //	1
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFIC		1 / f	
D. If amending the registered agent and/or renew registered agent and/or the new regis		Florida, enter the name of	the
Name of New Registered Agent	* M	1///	
New Registered Office Address:	(Florida street add (City)	esk) . Florida	Tin Code)
New Registered Agent's Signature, if changing I hereby accept the appointment as registered agent's signature.	ng Registered Agent:	id accept the obligations of ti	he position.
Signatur	e of New Registered Agent,	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	<u> 79</u>	John Doe	,	/ 1	
X Remove	<u>v</u>	Mike Jones	1/	//	
_X Add	<u>sv</u>	Sally Smith	<i>/</i> / /	H.	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	, ,	Address	
1) Change					
Add					
Remove					
2) Change					
Add					
Remove					
3) Change					
Add					
Remove					
4) Change		<u> </u>			
Add					
Remove					
5) Change		-			
Add					
Remove					
6) Change					
Add					
Remove					

ttach additional sheets, if necessary).	(Be specific)	
	1/1/	
	——————————————————————————————————————	· · · · · · · · · · · · · · · · · · ·
	and the second second	
rovisions for implementing the amen	nge, reclassification, or cancellation of issued Iment if not contained in the amendment itse	<u>suares,</u> lf:
(if not applicable, indicate N/A)		
	A / I A	
		

The date of each amendment	(s) adoption: 2-21-13
Effective date if applicable:	
	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
he amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.
	re approved by the shareholders through voting groups. The following statement and for each voting group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amendment(s) was/were sufficient for approval
by	(voting group)
	e adopted by the board of directors without shareholder action and shareholder
The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder
Dated	2-21-13
se	by a director, president or other officer if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court oppointed fiduciary by that fiduciary)
	William STAFFORD
	(Typed or printed name of person signing)
	president.
	(Title of person signing)