## P09000073773

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: VARCOM INC			
DOCUMENT NUMI	BER: P09000073773			
The enclosed Articles	of Amendment and fee are so	ıbmitted for fil	ing.	
Please return all corre	spondence concerning this ma	atter to the follo	owing:	·
	IVON GALLO			
		Name of C	ontact Person	n
	L&I GALLO INC			
		Firm/	Company	
	1200 DANBURY AVE			
		Ad	dress	
	DAVIE, FL 33325			
		City/ State	and Zip Cod	e
IVON	IGALLO@GMAIL.COM			
	E-mail address: (to be u	sed for future a	nnual report	notification)
For further information	n concerning this matter, pleas	sa call:		
	. concerning this matter, prea.	se can.		
IVON GALLO		at :	,954	818-8548
Name of Contact Person			Area Co	de & Daytime Telephone Number
Enclosed is a check for	r the following amount made	payable to the	Florida Depa	artment of State:
S35 Filing Fee	□\$43.75 Filing Fce & Certificate of Status	□\$43.75 Fi Certified (Additional enclosed)	Copy I copy is	☐\$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		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

VARCOM INC

(Name of Corporation as curren	tly filed with the Florida Dept. of State)	
P09000073773		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amende	ment(s) to
A. If amending name, enter the new name of the corporation:	ent.	
name must be distinguishable and contain the word "corporat. "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or	ion," "company," or "incorporated" or the abbreviati	enso on=
"Corp., Inc., or Co., or the designation Corp, Inc., or word "chartered," "professional association," or the abbreviation	"P.A."	ੋੜ 1
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u> )	<u> </u>	- 전 - -
	922	- <b>(9</b> )
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2416 DEER CREEK ROAD	
(Mauning dualess interpretation of the Bott)	WESTON, FL 33327	_
		-
D. If amending the registered agent and/or registered office ad new registered agent and/or the new registered office addre		
Name of New Registered Agent		
(Florida s	street address)	
New Registered Office Address:	, Florida	_
	(City) (Zip Code)	
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familian		
Signature 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>PT</u>	John D	<u>oe</u>	
X Remove	<u>v</u>	Mike J	<u>ones</u>	
X Add	<u>sv</u>	Sally S	<u>mith</u>	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) X Change 70	PRE		ANTONIO DE ABREU	2416 DEER CREEK ROAD
Add				WESTON, FL 33327
Remove				
2) X Change <b>To</b>	VP		MARIA F. DE ABREU FERNANDE	2416 DEER CREEK ROAD
Add				WESTON, FL 33327
Remove				
3) Change				
Add				
Remove				
4) Change		<del>-</del>	<u> </u>	
Add				
Remove				
5) Change				
Add		_		
Remove				
6) Change		<del></del>		
Add				
Remove				

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an amendment provides for an excharge rovisions for implementing the amen (if not applicable, indicate N/A)	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:	
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<u>provisions for implementing the amen</u>	ndment if not contained in the amendment itself:	

,	08/01/2016	
	idoption:	, if other than the
date this document was signed.		
	01/2016	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will epartment of State's records.	not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/were ad by the shareholders was/were s	lopted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.	
☐ The amendment(s) was/were ap must be separately provided fo	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
•	(voting group)	
action was not required.	lopted by the board of directors without shareholder action and shareholder	
•		
08/01/201 Dated	6	
	Estaid Of Secure	
(By a	director, president or other officer – if directors or officers have not been	
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court	
appoi	nted fiduciary by that fiduciary)	
	ANTONIO DE ABREU	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<del></del>