P0900013773

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FÁCLATAS SEL FLORIO

C. GOLDEN:
JUN 1 3 7017

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORA	TION: VARCON	1 INC				
DOCUMENT NUMBE	R:	P0900073773				
The enclosed Articles of	Amendment and fee are su	bmitted for filing.				
Please return all correspo	ondence concerning this mat	tter to the following:				
	,	ANTONIO DE ABRE	U			
		Name of Contact Persor	1			
_		Firm/ Company				
	:	2416 DEER CREEK	RD			
_	Address					
	WESTON FL 33327					
		City/ State and Zip Code	e			
	ABRE E-mail address: (to be us	EU9632@GMAIL.CO ed for future annual report	notification)			
For further information c	oncerning this matter, pleas	e call:				
	O DE ABREU	at (<u>954</u>	_)299-6800			
Name of	Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for the	he following amount made p	payable to the Florida Depa	ertment of State:			
■ \$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		Amend Divisio	Address ment Section in of Corporations Building			

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

	VARCOM INC	2017 JUN - 8 AM 1:40
(Name of C	Corporation as currently filed with the Florida D	
	P0900073773	TALL HEASSEE, FLORIDA
	(Document Number of Corporation (if known)	49
Pursuant to the provisions of section 607.100 its Articles of Incorporation:	06, Florida Statutes, this <i>Florida Profit Corporation</i>	adopts the following amendment(s) to
A. If amending name, enter the new name	e of the corporation:	
		The new
name must be distinguishable and contain "Corp.," "Inc.," or Co.," or the designati word "chartered," "professional association	n the word "corporation," "company," or "inco fon "Corp," "Inc," or "Co". A professional corp n," or the abbreviation "P.A."	orporated" or the abbreviation poration name must contain the
B. Enter new principal office address, if a (Principal office address MUST BE A STR		
		
C. Enter new mailing address, if applical	hle	444,314
(Mailing address MAY BE A POST OF		
D. If amending the registered agent and/o new registered agent and/or the new r	or registered office address in Florida, enter the registered office address:	name of the
Name of New Registered Agent	ANTONIO DE ABREU	
	5331 SHERIDAN ST	
	(Florida street address)	
New Registered Office Address:	HOLLYWOOD	, Florida33021
	(City)	(Zip Code)
New Registered Agent's Signature, if cha-	nging Registered Agent:	
	ed agent. I am familiar with and accept the obligat	tions of the position.
	Signature of New Registered Agent, if changing	ng

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 Do	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change				
Add				
Remove				
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

mending or adding additional A ach additional sheets, if necessary	v). (Be specific)			
•				
				
				11-2-11-2
		<u></u>		
			· · · · · · ·	
41-41-41-41-41-41-41-41-41-41-41-41-41-4			19.1	
•				
n amendment provides for an e				
ovisions for implementing the an (if not applicable, indicate N/A)	mendment if not conta	ined in the amendm	<u>ient itself:</u>	
(y mor approache; marcure (ma)	,			
				_ .

Ine date of each amendment(s) adoption date this document was signed.	i:, if other than the
	JUNE 2nd, 2017
Effective date if applicable:	(no more than 90 days after amendment file date)
Note: If the date inserted in this block document's effective date on the Departme	oes not meet the applicable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
☐ The amendment(s) was/were adopted by by the shareholders was/were sufficient	y the shareholders. The number of votes cast for the amendment(s) t for approval.
	by the shareholders through voting groups. The following statement oting 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)
	(voting group)
☐ The amendment(s) was/were adopted by action was not required.	y the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by action was not required.	y the incorporators without shareholder action and shareholder
Dated	2017)
(By a director,	president or other officer – if directors or officers have not been
	n incorporator – if in the hands of a receiver, trustee, or other court uciary by that fiduciary)
	ANTONIO DE ABREU
	(Typed or printed name of person signing)
	(Title of person signing)