P09000092198

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
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14 JUN 23 PH 2: 53

SECRETARY OF STATE

Amend

JUL 1 0 2014 T. CARTER

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: _VIKING-HD CORP. DOCUMENT NUMBER: P09000092198 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Manuel Mendez Name of Contact Person Firm/ Company 7901 W 25 Court Address Hialeah, FL 33016 City/ State and Zip Code rwaynea36@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Manuel Mendez Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee ■ \$35 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) Street Address **Mailing Address** Antendment Section Amendment Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

Articles of Amendment Articles of Incorporation of



14 JUN 23 PN 2:53

VIKING-HD CORP.

(Name of Corporation as currently filed with the Florida Dept. of State) P09000092198

nt(s) to

(Docume	nt Number of Corporation (if known)	
Pursuant to the provisions of section 607 its Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit C	Corporation adopts the following amendment
A. If amending name, enter the new na	ame of the corporation:		
N/A			The new
	nation "Corp," "Inc," or "	'Co". A profess	or "incorporated" or the abbreviation of the contain the ional corporation name must contain the
B. Enter new principal office address, if applicable:		N/A	
(Principal office address <u>MUST BE A S</u>			
C. Enter new mailing address, if appl	icable:	N/A	
(Mailing address <u>MAY BE A POST</u>	OFFICE BOX)		
If amending the registered agent an new registered agent and/or the new			enter the name of the
Name of New Registered Agent	Robert Wayne		
<u>Name of New Registered Agent</u>	1225 SW 87 Av	(ODLIO	
		reet address)	
	Miami	eer aaar emy	33174
New Registered Office Address:	(Citv)		, Florida_33174
	(50,7)		, ,_ ,
New Registered Agent's Signature, if c			
I hereby accept the appointment as regist	ered agent <u>I am fami</u> liar	with and accept t	he abligations of the position.
Si	gnature of New Registered.	Ageht, if changin	g
		•	

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.

X Change	<u>PT</u> <u>;</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u> <u>s</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	PD	Aleida Jimenez	7901 W 25 Court
Add			Hialeah, FL 33016
Remove			
2) Change	VP	Ramon A. Jimenez	7901 W 25 Court
Add			Hialeah, FL 33016
Remove			
3) Change	Р	Manuel Mendez	7901 W 25 Court
Add			Hialeah, FL 33016
Remove			
4) Change	<u>s</u>	Alex Da Silva	7901 W 25 Court
Add			Hialeah, FL 33016
5) Change			
Add			
Remove			
δ) Change			
Add			
Remove			

A	additional sheets, if r	necessary). (Be spe	er change(s) here: ecific)		
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			······································	<u> </u>	
			·		······································
<u>1 an ar</u> provis	<u>nendment provides</u> ions for implementi	ng the amendment i	classification, or car f not contained in t	ncellation of issued sha he amendment itself:	res,
	not applicable, indic	cate N/A)			
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date this document was signed.	, if other than the
Effective date if applicable: June 11, 2014	
(no more than 90 days after amendment file date)	
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	ı
The amendment(s) was/were approved by the shareholders through voting groups. The following statemen must be separately provided for each voting group entitled to vote separately on the amendment(s):	nt .
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 06/18/2014 Signature (By a director president or other officer – if directors or officers have not been	
Signature	
(b) a project of other critical in an extension of the control of	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
Manuel Mendez	
(Typed or printed name of person signing)	***************************************
President	
(Title of person signing)	