Division of Corporations Electronic Filing Cover Sheet

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(((H24000026663 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : IDEAS CARVAJAL LLC

Account Number : 120220000006 Phone : (321)333-5565

Fax Number : (407)565-5637

\*\*Enter the enail address for this business entity to be used for future \_\_:

annual report mailings. Enter only one email address please. \*\*

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN V.I.A. TRANSPORTATION, INC.

Certificate of Status	0
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Electronic Filing Menu Corporate Filing Menu

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPO	PRATION: V.I.A. TRANSPO	RTATION, INC.	
	IBER: P09000093120		
	s of Amendment and fee are s	ubmitted for filing.	
Please return all corre	espondence concerning this ma	utter to the following:	
	TORRES, VICTOR		
		Name of Contact Perso	on .
	VIAS INC.		
		Firm/ Company	
	670 MAGNOLIA DR	Firm Company	
	* ** *** *** *** *** *** *** *** *** *	Address	
	KISSIMMEE FL 34744	Authean	•
		City/ State and Zip Coo	ie
	i-f-Guissesses is add a sur		•
	info@viatransorlando.com	sed for future annual repor	
For further information	on concerning this matter, plea		, 747 3933
Name	of Contact Person	at (407 ) 747 3933  Area Code & Daytime Telephone Number	
Enclosed is a check for	or the following amount made		
₹ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	lling Address		Address
	endment Section	Amendment Section	
Division of Corporations P.O. Box 6327			on of Corporations entre of Tallahassee
Tallahasacc. FL 32314		2415 N. Monroe Street, Suite 810	

Taliahassec, FL 32303

## Articles of Amendment to Articles of Incorporation of

P09000093120	flied with the Florida D			
		ent. of State)		
(Document Number of	Corporation (if known)			
Pursuant to the provisions of section 607,1006, Florida Statutes, this $F_0$ its Articles of Incorporation:	lorida Prosit Carparation	adopts the follow	ving amendn	nent(s) t
A. If amending name, enter the new name of the corporation: VIAS, INC.				
name must be distinguishable and contain the word "corporation," "co "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	mpany," or "Incorporate professional corporation	d" or the abbrevio name must con	The ne	D
B. Enter new principal office address, if applicable; (Principal office address <u>MUST BE A STREET ADDRESS</u> )			- PG	,
			1024 DAN	
C. Enter new mailing address, if applicable:			-19	• •
(Malling address MAY BE A POST OFFICE BOX)			5	
			വ വ	
<ol> <li>If amending the registered agent and/or registered office address new registered agent and/or the new registered office address:</li> </ol>	s in Florida, enter the n	ame of the		
Name of New Registered Apent				
(Florida street	address)			
New Registered Office Address:		, Florida		
(C	(ny)	(ZI	p Code)	

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), 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 Funancial Officer, If an officerholds 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.

Exemple:

X_Change	PT	John Doe	
X Remove	Y	Mike Jones	
_X Add	SY	Sally Smith	
Type of Action (Check One)	Titla	Name	Address
1) Change			
Add			
Remove			024
2) Change			
Add			9
Remove 3 ) Change			
Add			ن
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary). (Be specific)	(a) here:		
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		<u></u>	<del> 1</del>
fith Amendment provides for an exchange region (fig.	inn an annualization of leaved above		
f an amendment provides for an exchange, reclassifica provisions for implementing the amendment if not con	alged in the amondment itself:	<u>:1.</u>	
(If not applicable, indicate IVA)	HAMAR AND SAME PARKETS MANUAL THROUGH		
<del></del> .			

The date of each amendment(s) dute this document was signed.	*doption:	, if other than the
Effective date if applicable:		
THE STATE OF THE S	(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in this document's effective date on the	block does not meet the applicable statutory filing requirements, this date	will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	dopted by the incorporators, or board of directors without shareholder action	and shareholder
☐ The amendment(s) was/were s by the shareholders was/were	dopted by the sharoholders. The number of votes cast for the amendment(s) sufficient for approval.	
The amendment(s) was/were emust be separately provided f	pproved by the shareholders through voting groups. The following statemen or each voting group entitled to vote separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were sufficient for approval	2024 JAN 19 1110: 5
by		
	(voting group)	19
01/19/20		<del></del> ,
Dated	<del>1/1/1</del>	5
Signature	<del></del>	S. C.
colos	director, president or other officer – if directors or officers have not been red, by an incorporator – if in the hands of a receiver, trustee, or other court need fiduciary by that fiduciary)	
	VICTOR TORRES	
	(Typed or printed name of person signing)	<del></del>
	FRESIDENT	
	(Title of person signing)	