P1000073397

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COVER LETTER

TO: Amendment Section

P.O. Box 6327

Tallahassee, FL 32314

Division of Corporations NAME OF CORPORATION: ____VENECAN SERVICES, CORP DOCUMENT NUMBER: P10000073397 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: HORACIO E OTAIZA Name of Contact Person VENECAN SERVICES, CORP Firm/ Company 10815 NW 50TH STREET APTO, 302 Address **DORAL, FL 33178** City/ State and Zip Code VENECANSERVICESCORP@HOTMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: HORACIO E OTAIZA Name of Contact Person Area Code & Daytime Telephone Number 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 Certified Copy (Additional copy is enclosed) (Additional Copy is enclosed) **Mailing Address Street Address** Amendment Section Amendment Section Division of Corporations **Division of Corporations**

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to **Articles of Incorporation** of

VENECAN SERVICES, CORP

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

P10000073397

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607, its Articles of Incorporation:		s riorua rroju Corpora	non adopts the following at	пенатет
A. If amending name, enter the new na	me of the corporation:			
VENECAN. CORP			Th	e new
name must be distinguishable and con- "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp." "Inc," or	"Co". A professional a	ncorporated" or the abbre- corporation name must con-	eviation tain the
R. Enter new principal office address	if annlicable:	N/A	<u> </u>	
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)			100	1 mm p + 2 m
			29 132)
			7 T	1
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		N/A		भूत्र का स्थाप स्थापना
(174,174,174,174,174,174,174,174,174,174,	<u> </u>		<u> </u>	1
D. If amending the registered agent an new registered agent and/or the new			he name of the	
Name of New Registered Agent	N/A			
	(Florida :	street address)		
New Registered Office Address:	N/A		, Florida	
regimered office man ess.		(City)	(Zip Cod	e)
New Registered Agent's Signature, if c I hereby accept the appointment as regist			ivations of the novition	
t nervoy accept the appointment as regist	егеа адеш гат јатина	і жин ана иссерсіне оон	gations by the position.	

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 Doc	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change		N/A	
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

L. It amending or a Attach <i>additional</i>	<mark>idding additional Ai</mark> l sheets, if necessary)	rticles, enter cha). (Be specific)	nge(s) here:			
N/A						
<u> </u>					· · · · · · · · · · · · · · · · · · ·	
			·			<u> </u>
						
			,			
<u> </u>						
. If an amendmen	t provides for an ex mplementing the an	change, reclassif	ication, or cane	ellation of issue	d shares,	
	icable, indicate N/A)		contained in the	amenument us	<u> </u>	
//A						
						
						
				<u></u>		
,			······································			
						···

	08/23/2016
The date of each amendment	
date this document was signed	
Effective date if applicable:	08/23/2016
	(no more than 90 days after amendment file date)
	his block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
Adoption of Amendment(s)	(CHECK ONE)
■ The amendment(s) was/weby the shareholders was/weby	e adopted by the shareholders. The number of votes east for the amendment(s) re sufficient for approval.
	e approved by the shareholders through voting groups. The following statement d for each voting group entitled to vote separately on the amendment(s):
	cast for the amendment(s) was/were sufficient for approval
by	(voting group)
, <u> </u>	(voting group)
	e adopted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/we action was not required.	e adopted by the incorporators without shareholder action and shareholder
Dated	8/24/16 / mar 20/20/
SG	y a director, president or other office. If directors or officers have not been lected, by an inegrporator if in the hands of a receiver, trustee, or other court pointed fiduciary by that fiduciary)
	HORACIO E OTAIZA
	(Typed or printed name of person signing)
	PRESIDENT
	(Title of person signing)