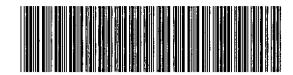
## P1000035184

(Reque	estor's Name)	,
(Addre	ss)	
(Addre	ss)	
(City/S	tate/Zip/Phone #)	
PICK-UP	WAIT	MAIL
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(Document Number)		
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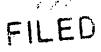
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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORE	PORATION:	V.I.S TAX AND IMMIGRATION CORP	
DOCUMENT NU	MBER:	P11000035184	
The enclosed Artic	les of Amendment an	d fee are submitted for filing.	
Please return all co	orrespondence concern	ing this matter to the following:	
		IDANIA HERNANDEZ	
		Name of Contact Person	
	V.I.S.	TAX AND IMMIGRATION CORP	
		Firm/ Company	
,	1198 WEST 23 ST		
		Address	
	HIALEAH, FL 33010		
		City/ State and Zip Code	
	E-mail address: (to	ANIA17@YAHOO.COM  be used for future annual report notification)	
For further informa	ation concerning this r	natter, please call:	
	NIA HERNANDEZ	at ( <u>305</u> ) <u>989-8090</u>	
Name	of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a checl	k for the following am	ount made payable to the Florida Department of State:	
	☐ \$43.75 Filing Fee & Certificate of Statu		
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 Articles of Incorporation**



V.I.S. TAX AND IMMIGRATION CORP

2811 APR 18 PM 2: 19

(Name of Corporation as currently filed with the Florida Dept. of State) RETARY OF STATE
TALLAHASSEE, FLORIDA

P11000035184

(Document Number of Corporation (if known)

Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following

	N/A	The nev
name must be distinguishable and contain abbreviation "Corp.," "Inc.," or Co.," or t name must contain the word "chartered," "p	he designation "Corp," "Inc," or "Co	o". A professional corporation
B. Enter new principal office address, if a (Principal office address MUST BE A STRE		
C. Enter new mailing address, if applicab (Mailing address MAY BE A POST OF)		
D. If amending the registered agent and/o new registered agent and/or the new re	_	, enter the name of the
Name of New Registered Agent:	BLANCO SERAFIN	
New Registered Office Address:	2200 WEST OKEECHOBEE (Florida street address)	
New Registered Agent's Signature, if chan I hereby accept the appointment as registered		, Florida 33010 (Zip Code) the obligations of 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)

<u>Title</u>	<u>Name</u>	Address	Type of Action
VP BLANCO, SERAFIN	BLANCO, SERAFIN	2200 WEST OKEECHOBEE HIALEAH, FL 33010	_
			_
			_
	ding or adding additional Articles, edditional sheets, if necessary). (Be s		
provisi (if n		e, reclassification, or cancellation of interesting the second se	
N/A		<del> </del>	
·			

The date of each amendment(s) adoption: 04/13/2011		
Effective date if applicable:	04/13/2011	(date of adoption is required)
	(no more than 90	days after amendment file date)
Adoption of Amendment(s)	( <u>CHI</u>	ECK ONE)
The amendment(s) was/we by the shareholders was/w		shareholders. The number of votes cast for the amendment(s) pproval.
		e shareholders through voting groups. The following statement group entitled to vote separately on the amendment(s):
"The number of votes	cast for the amend	lment(s) was/were sufficient for approval
by		
	(voting group)	<del></del>
The amendment(s) was/we action was not required.	ere adopted by the l	board of directors without shareholder action and shareholder
The amendment(s) was/we action was not required.	ere adopted by the i	incorporators without shareholder action and shareholder
Dated_04/1	3/2011	<del></del>
Signature _		Janier Adez
sel		ent or other officer – if directors or officers have not been orator – if in the hands of a receiver, trustee, or other court y that fiduciary)
	_ da	No Hernandez
	(Тур	ed or printed name of person signing)
		PRESIDENT
	(Title of	person signing)