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EXAMINER

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Vangual	rd Consulting Services, Inc.	
DOCUMENT NUMBER: P1100003925	50	
The enclosed Articles of Amendment and	fee are submitted for filing.	
Please return all correspondence concerni	ng this matter to the following:	
Michael B. Kuknyo	Name of Contact Person	
Vanguard Consulting Se	ervices, Inc. Firm/ Company	<u> </u>
P.O. Box 100984		
·	Address	
Cape Coral, FL. 33910-	0984 City/ State and Zip Code	
vanguardconsultingservic E-mail address For further information concerning this ma	s: (to be used for future annual repor	t notification)
Michael B. Kuknyo	at (239) 222-1175
Name of Contact Person		de & Daytime Telephone Number
Enclosed is a check for the following amo	unt made payable to the Florida Dep	partment of State:
☑ \$35 Filing Fee ☐\$43.75 Filing Certificate of		S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Ameno s Divisio Cliftor 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation of

anguard Consulting Services, Inc.	Ġ
(Name of Corporation as currently filed with the	: Florida Dept, of State)
1000039250	
(Document Number of Corporation	(if known)
rsuant to the provisions of section 607.1006, Florida Statutes endment(s) to its Articles of Incorporation:	, this Florida Profit Corporation adopts the fol
If amending name, enter the new name of the corporation:	
e new name must be distinguishable and contain the word "cor breviation "Corp.," "Inc.," or Co.," or the designation "Corp ne must contain the word "chartered," "professional association	o," "Inc," or "Co". A professional corporation
Enter new principal office address, if applicable;	6 Evergreen Drive
rincipal office address <u>MUST BE A STREET ADDRESS</u>)	North Fort Myers, FL 33917
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	P.O. Box 100984
	Cape Coral, FL. 33910
If amending the registered agent and/or registered office adnew registered agent and/or the new registered office address	
6 Evergreen Drive	street address)
6 Evergreen Drive	street address), Florida_33917 (Zip Code)

Signature of New Registered Agent, if changing

If AMENDING the Officers and/or Directors, please list all officers/directors of the corporation as you now want the record to be. Please indicate the title(s), name and address for each officers/director. (Our database can index up to 6 officers/directors. If you have more than 6 officers/directors, please list them on an

additional sheet.)

Title(s)		Name	4	Address
1) <u>Pres.</u>		Dominick G. Delli Paoli		22 SE 14th Ct. Cape Coral, FL. 33990
2) <u>VP</u>		Michael B. Kuknyo	<u>-</u>	5 Evergreen Drive North Fort Myers, FL. 33917
3)			 	
4)			- - -	
5)			 	
6)			- <u>-</u>	
<u>If REMOVING</u>	G an office	r and/or director, please list the	title(s) and	name of the officer/director to be removed:
Title(s)	<u>Name</u>		Title(s)	<u>Name</u>
1) <u>P</u>	Kristin N	McKeen	4)	
2)		······	5)	

If amending or adding additional Art (attach additional sheets, if necessary).	(Be specific)	
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provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
(y noi appricable, maictae WA)	
.	
The date of each amendment(s) adoption: 10/1/2011	
The date of each amendment(s) adoption: 10/1/2011	
Effective date if applicable: 10/1/2011	
(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 amendme	nt(s)
by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ment
must be separately provided for each voting group entitled to vote separately on the amenament(s):	
"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 shareho	lder
action was not required.	
_	
The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder	
action was not required.	
Dated 12/01/2011 , ///	
Signature Signature	
(By a director, president or other officer – if directors or officers have not bee	n
selected, by an incorporator – if in the hands of a receiver, trustee, or other co	u u r t
appointed fiduciary by that fiduciary)	
"FF, -,	
Michael B. Kulkaya	
Michael B. Kuknyo	
(Typed or printed name of person signing)	
•	•
<u>V.P.</u>	
(Title of person signing)	