## P11000039250

(Re	questor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
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(Do	ocument Number)	
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Amend

JUL 3 0 2012

T. BROWN

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

AME OF CORPORATION: Vanguard Consulting Services, Inc.
OCUMENT NUMBER: P11000039250
he enclosed Articles of Amendment and fee are submitted for filing.
lease return all correspondence concerning this matter to the following:
Dominick G. Delli Paoli
Name of Contact Person
Vanguard Consulting Services, Inc.
Firm/ Company
P.O. Box 110984
Address
Cape Coral, Fl. 33910-0984
City/ State and Zip Code
vanguardconsultingservices@gmail.com
E-mail address: (to be used for future annual report notification)
an firmber in formation concerning this motter places calls
or further information concerning this matter, please call:
Dominick G. Delli Paoli at (239 ) 989-6547
Name of Contact Person Area Code & Daytime Telephone Number
inclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status  Certificate of Status  Certified Copy (Additional copy is enclosed)  \$43.75 Filing Fee Certified Copy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of



Vanguard Consulting Services, Inc.						
	currently filed with the Fl	orida Dept. of State)				
P11000039250						
(Document Number of Corporation (if known)						
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this I	Florida Profit Corporation ado	pts the following amendment(s			
A. If amending name, enter the new na	ame of the corporation:					
			The new			
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "C	Co". A professional corporati	ated" or the abbreviation on name must contain the			
P. Enter new principal office address	if applicables	22 SE 14th Ct.				
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		Cape Coral, Fl.	33990			
•						
C. Enter new mailing address, if apple (Mailing address MAY BE A POST)						
		<u></u>				
D. If amending the registered agent an new registered agent and/or the new			of the			
Name of New Registered Agent	Dominick G. Del					
Name of New Registered Agent	22 SE 14th Ct.					
	(Florida stre	et address)				
New Registered Office Address:	Cape Coral, FL.	, Florida_	3990			
New Negation ou Office Huards.	(City)		(Zip Code)			
New Registered Agent's Signature, if c	hanging Registered Agents					
I hereby accept the appointment as regist	tered agent. I am familiar w	ith and accept the obligations	of the position.			

Page 1 of 4

Signature of New Registered Agent, if changing

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 Doe	
X Remove	Y	Mike Jones	
<u>X</u> Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1)Change	VP	Michael B. Kuknyo	6 Evergreen Dr.
Add			North Fort Myers, FL
X Remove			33917
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			÷
Add			
Remove			

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		fication, or cancellatio	n of issued shares.
visions for implementing (if not applicable, indicat	the amendment if not one (N/A)	contained in the amen	dment itself:
visions for implementing (if not applicable, indicat	the amendment if not	contained in the amen	dment itself:
visions for implementing (if not applicable, indicat	the amendment if not one (N/A)	contained in the amen	dment itself:
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visions for implementing (if not applicable, indicat	the amendment if not one (N/A)	contained in the amen	dment itself:
	the amendment if not one (N/A)	contained in the amen	dment itself:

The date of each amendment(s) adoption: July 1, 2012
Effective date if applicable: July 1, 2012
(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.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by"  (voting group)
(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.
7/24/2012
Signature Dominle S. Delli Bail
(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Dominick G. Delli Paoli
(Typed or printed name of person signing)
President
(Title of person signing)