P11000052128

(Requestor's Name)
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TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: <u>VC FOOD COR</u>	Р
DOCUMENT NUMBER: P11000052128	
The enclosed Articles of Amendment and fee are s	submitted for filing.
Please return all correspondence concerning this m	natter to the following:
<u>Domingo Abinader</u>	Name of Contact Person
AB Multi Services and Income T	
	Firm/ Company
121 Webb DR Ste 100	
	Address
Davenport, FL 33837	27. (0
(City/ State and Zip Code
abmultiservices @yahoo.com E-mail address: (to be	used for future annual report notification)
For further information concerning this matter, ple	ase call:
Domingo Abinader	ot / 407 \ \ \ 022 \ 0211
Name of Contact Person	at (407) 922-9211 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made	e payable to the Florida Department of State:
✓ \$35 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & □\$52.50 Filing Fee Certified Copy (Additional copy is enclosed) □\$52.50 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	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of Corporation as currently filed with the Florida Dept. of	State)
P11000052128	SAME TO SEE
(Document Number of Corporation (if known)	1
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Promendment(s)</i> to its Articles of Incorporation:	ofit Corporation adopts the for
a. If amending name, enter the new name of the corporation:	
The new name must be distinguishable and contain the word "corporation," "composition "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Contain the word "chartered," "professional association," or the abbrev	". A professional corporation
3. Enter new principal office address, if applicable: Principal office address <u>MUST BE A STREET ADDRESS</u>)	
	
7 Fadan a a a 2P - 11 - 16 - 11 - 11	
(Mailing address MAY BE A POST OFFICE BOX)	
(Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida,	enter the name of the
(Mailing address MAY BE A POST OFFICE BOX)	enter the name of the
(Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida,	enter the name of the
(Mailing address MAY BE A POST OFFICE BOX) 1. If amending the registered agent and/or registered office address in Florida, new registered agent and/or the new registered office address: Name of New Registered Agent: Joel Collado	enter the name of the
(Mailing address MAY BE A POST OFFICE BOX) 1. If amending the registered agent and/or registered office address in Florida, new registered agent and/or the new registered office address: Name of New Registered Agent: Joel Collado 2435 US HWY 98 N	enter the name of the
D. If amending the registered agent and/or registered office address in Florida, new registered agent and/or the new registered office address: Name of New Registered Agent: Joel Collado	enter the name of the
(Mailing address MAY BE A POST OFFICE BOX) D. If amending the registered agent and/or registered office address in Florida, new registered agent and/or the new registered office address: Name of New Registered Agent: Joel Collado 2435 US HWY 98 N	enter the name of the

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 officer/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			Address
1) <u>P</u>		Joel Collado			2435 US HWY 98 N Lakeland, FL 33805
2)		Victor #	Suazo		3424 W. minnehaha St Januar, 1919 33414
3)				-	
4)					
5)				- .	
6)				- -	
<u>If REMOVI</u>	NG an office	er and/or director, pl	ease list the ti	itle(s) and	name of the officer/director to be removed:
Title(s)	Name			Title(s)	<u>Name</u>
1)				4)	
2)				5)	
3)				6)	

If amending or adding additional Arti attach additional sheets, if necessary).	(Be specific)
-	
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	r implementing the amendment if not contained in the amendment itself: $licable$, $indicate N/A$)
<u> </u>	
<u> </u>	
he date of each	amendment(s) adoption:
ne date of each	amendment(s) adoption.
ffective date <u>if a</u>	pplicable:
<u></u>	(no more than 90 days after amendment file date)
doption of Ame	ndment(s) (<u>CHECK ONE</u>)
The amendmen	t(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s)
	lders was/were sufficient for approval.
The amendmen	t(s) was/were approved by the shareholders through voting groups. <i>The following statement</i>
	itely provided for each voting group entitled to vote separately on the amendment(s):
"The num	ther of votes cast for the amendment(s) was/were sufficient for approval
	· ·
by	""
	(voling group)
	t(s) was/were adopted by the board of directors without shareholder action and shareholder
action was not r	required.
	t(s) was/were adopted by the incorporators without shareholder action and shareholder
action was not r	required.
7	Dated 11/21/2011
'	Saled 11/2 1/2011
9	Signature
	(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)
	Joel Collado
	(Typed or printed name of person signing)
	Described.
	President (Title of person signing)
	(Title of Person signing)