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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations

(
NAME OF CORPORATION: VISOSAN	CORPORAT	ION
DOCUMENT NUMBER: P110000818	333	
The enclosed Articles of Amendment and fee are sub		
Please return all correspondence concerning this mat	ter to the following:	
OSCAR ASAF	SOBERON	
	Name of Contact Person	1
	Firm/ Company	
C/O 2208 SW 8	8th STREET	
NALANAL EL 224	Address	
MIAMI, FL 331	City/ State and Zip Cod	ρ.
floulticardicae		•
fimultiservices@ya	anoo.com ed for future annual report	notification)
`		,
For further information concerning this matter, pleas	e call:	
OSCAR ASAF SOBERON	_{at (} 786	290-3319
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made p	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	□\$43.75 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		Address
Division of Corporations	Amendment Section Division of Corporations	
P.O. Box 6327	Clifton	Building
Tallahassee, FL 32314	2661 E	xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to

Articles of Incorporation of

FILED

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VISOSAN CORPORATION

AN CORPORATION

(Name of Corporation as currently filed with the Florida Dept. of STATE) (ASSESSED FOR DATE)

(Document Number of Cor)	rporation (if known)
Pursuant to the provisions of section 607.1006, Florida Stats Articles of Incorporation:	atutes, this Florida Profit Corporation adopts the following amendment(s
A. If amending name, enter the new name of the corpor	ration:
name must be distinguishable and contain the word "c	The new corporation," "company," or "incorporated" or the abbreviation Inc," or "Co". A professional corporation name must contain the previation "P.A."
• •	N/A
B. Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRE.	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	N/A
D. If amending the registered agent and/or registered on new registered agent and/or the new registered office.	office address in Florida, enter the name of the ce address:
Name of New Registered Agent N/A	
	(Florida street address)
	•
New Registered Office Address:	(Florida street address), Florida (City) (Zip Code)
	, Florida

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 Do	<u>9e</u>	
X Remove	<u>v</u>	Mike Jo	ones .	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	D		OSCAR ASAF SOBERON	C/O 2208 SW 8th STREET
Add				MIAMI, FL 33135
Remove				
2) Change	D		MARIA VICTORIA PEREZ :	C/O 2208 SW 8th STREET
Add			ESTRADA	MIAMI, FL 33135
Remove				
3) Change	<u> </u>	_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				100
6) Change				
Add				
				
Remove				

E. If amending or adding additional Arti (Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
N/A	
	17577/7/03/8/4
1	

provisions for implementing the amer	ange, reclassification, or cancellation of issued shares, and and an annual state of the contained in the amendment itself:
(if not applicable, indicate N/A)	
N/A	
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
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The date of each amendment(s) adoption: 10/06/2014	, if other than the
date this document was signed.	
Effective date if applicable:	
(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)	
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.	
Dated_10/06/2014	
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)	_
OSCAR ASAF SOBERON	
(Typed or printed name of person signing)	
DIRECTOR	
(Title of person signing)	