# P11000090458

(Re	equestor's Name)		
(Ac	ddress)		
(Ar	ddress)		
(Ci	ity/State/Zip/Phone	: #)	
PICK-UP	☐ WAIT	MAIL MAIL	
(B	usiness Entity Nan	ne)	
(De	ocument Number)		
Certified Copies	Certificates	of Status	
Special Instructions to Filing Officer:			

Office Use Only

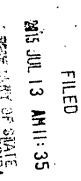


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### FLORIDA DEPARTMENT OF STATE Division of Corporations

June 2, 2015

Jerome Cismoski 3765 41st Street S #74C St. Petersburg, FL 33711

SUBJECT: VAL A INCORPORATED

Ref. Number: P11000090458

We have received your document for VAL A INCORPORATED and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a foreign (out of state) corporation, but your entity is a Florida domestic profit corporation. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 015A00011555

Annette Ramsey Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

10:	Amendment Section Division of Corporations			
SUBJ	ECT:  Val-A Incoporated  Name		<u></u>	
	Name	of Corporation		
	UMENT NUMBER: P11000090458			
The en	nclosed Amendment and fee are subm	itted for filing.		
Please	e return all correspondence concerning	this matter to the follo	wing:	
Jeromo	e Cismoski			
	Name of Contact Person			
	Firm/Company			
3765 4	11st Street S; #74C			
	Address			
St Pete	ersburg, FL 33711			
	City/State and Zip Code	·		
jerrytp	c48@gmail.com			
Е	E-mail address: (to be used for future annu	ual report notification)	_	
For fu	orther information concerning this mat	ter, please call:		
Jerry (	Cismoski	708 205-4 at ( )	390	
	Name of Contact Person	_ at () Area Code & Dayt	ime Teleph	one Number
Enclo	sed is a check for the following amount	nt:		
X	\$35.00 Filing Fee \$43.75 Filing Fee & Certificate of Status			\$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)
Amen Divisi P.O. I	ng Address: Idment Section ion of Corporations Box 6327 nassee, FL 32314	Street Address: Amendment Section Division of Corporati Clifton Building 2661 Executive Center Tallahassee, FL 3230	er Circle	

## **COVER LETTER**

TO: Amendment Section

Division of Corporations			
NAME OF CORPORATION: VAL A	INCORPORATED 11000090458		
DOCUMENT NUMBER:	11000090458		
The enclosed Articles of Amendment and fee are sul	bmitted for filing.		
Please return all correspondence concerning this mat	ter to the following:		
	Name of Contact Person		
V	AL A INCORPORATED		
3765	Firm/ Company  5 41 ST ST S / UNIT 74C		
	ST. PETERSBURG, FL 33711 City/State and Zin Code		
	City/ State and Zip Code		
~			
E-mail address: (to be us	RRYTPC4BeGMA1L, COM ed for future annual report notification)		
For further information concerning this matter, pleas	e call:		
JEROME (ismosk	at ( 70B ) 205 - 4390  Area Code & Daytime Telephone Number		
Name of Contact Person	Arca Code & Daytime Telephone Number		
Enclosed is a check for the following amount made p	payable to the Florida Department of State:		
\$\text{S35 Filing Fee & Certificate of Status}\$\$ Certificate of Status	□S43.75 Filing Fee & □S52.50 Filing Fee Certified Copy (Additional copy is enclosed) □S52.50 Filing Fee Certificate of Status (Additional Copy is enclosed)		
Mailing Address	Street Address		
Amendment Section Division of Corporations	Amendment Section Division of Corporations		
P.O. Box 6327	Clifton Building		
Tallahassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301



#### Articles of Amendment to Articles of Incorporation

FILED

2015 JUL 13 AH 11: 35 (Name of Corporation as currently filed with the Florida Dept. of State) with the Florida Dept. of State OF STATE (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C. Enter new mailing address, if applicable: (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 new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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	<u>V</u>	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	N/A	<u>Addres</u> s	
1) Change			~/ A		_
Add					_
Remove					
2) Change			N/A		_
Add					_
Remove					_
3 ) Change			N/A		
Add					
Remove			•		
4) Change			N/A		_
Add			,		_
Remove					
5) Change			N/A		_
Add					
Remove					_
6) Change			N/A	<del>-</del>	_
Add			ť		_
Remove					

(Attach additional	dding additional Ar sheets, if necessary).	(Be specific)				
,	N/A					
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provisions for in	provides for an exc aplementing the am	endment if not co	ontained in the	amendment itsel	<u>snares,</u> lf:	
(if not applic	cable, indicate N/A)					
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The date of each amendment(s) adoption: date this document was signed.		, if other than the
ŭ	-1-2015	
-	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not document's effective date on the Department of S	of meet the applicable statutory filing requirements, this date will state's records.	l not be listed as the
Adoption of Amendment(s) (CHE	ECK ONE)	
The amendment(s) was/were adopted by the sl by the shareholders was/were sufficient for ap	hareholders. The number of votes cast for the amendment(s) oproval.	
	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	ng group)	
$\Omega$	oard of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adopted by the in action was not required.	neorporators without shareholder action and shareholder	
Dated	A Cismosli	
	ent or other officer - if directors or officers have not been portior - if in the hands of a receiver, trustee, or other court by that fiduciary)	
<u>JE</u>	Rome J. (ismoski	
(1)	yped or printed name of person signing)	
	(Title of person signing)	<u>-</u>