P13000005887

(Re	equestor's Name)	
. (Ad	ldress)	
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(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)
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02/04/13--01042--012 **43.75



M/C 2-6-13

COVER LETTER

Division of Corporations
NAME OF CORPORATION: VINTAGE WITH ATWIST COMPANDOCUMENT NUMBER: P13000005887
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person Vintage With at West Company 15864 Corintha I.M Address Delhay Beach Fl 33446 City/ State and Zip Code Isalavalle a, amail. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Contact Person at (56) 716-2104 Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed) \$43.75 Filing Fee & Certified Copy (Additional Copy is enclosed)

Mailing Address

TO: Amendment Section

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
Vintage Witha Twist Company
(Name of Corporation as currently filed with the Florida Debt. of State)
<u> </u>
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation: USA LAVALLE INCORPORCHED The new
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:, Florida
(City) (Zip Code)
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.

X Change	<u>PT</u>	John Do	<u>e</u>		
X Remove .	<u>v</u>	Mike Jo	nes		
X Add	<u>sv</u>	Sally Sn	<u>nith</u>		
Type of Action (Check One)	<u>Title</u>		Name		Address
1) Change	 				
Add					
Remove					
2) Change		_			
Add					
Remove					,
3) Change		_			
Add					
Remove					
4) Change			· · · · · · · · · · · · · · · · · · ·		
Add					
Remove					**************************************
5) Change					
Add					
Remove					
6) Change		_			
Add					**************************************
Remove					

Attach <i>additi</i>	or adding addition onal sheets, if neces	ssary). (Be speci	fic)		
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f an amendi	nent provides for	an exchange, recl	assification, or can	cellation of issued	shares.
(if not a	or implementing ti pplicable, indicate	N/A)	not contained in tr	ne amendment itsel	<u>I:</u>
					<u>,,,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>
			<u>. </u>		·
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The date of each amendment(s) add	$\frac{2}{11/13}$
	option:
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)
Adoption of Amendment(s)	(CHECK ONE)
The amendment(s) was/were adop by the shareholders was/were suff	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
	or the amendment(s) was/were sufficient for approval
by	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	(voting group)
☐ The amendment(s) was/were adoptaction was not required.	oted by the board of directors without shareholder action and shareholder
The amendment(s) was/were adoptaction was not required.	oted by the incorporators without shareholder action and shareholder
Dated	Inlia Ravallo
selected	rector, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)
_	Lisalavalle
	(Typed or printed name of person signing)
<u>-</u>	President/Owher
	(Title of person signing)