P13000034451

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14 FEB 20 AM 9: 02
SECRETARY OF STATE
TALLAHASSEE FLOARS.

FEB 21 2014 C. CARROTHERS

COVER LETTER

Division of Corporations	TO:	Amendment Section
Bivibion of corporation.		Division of Corporations

NAME OF CORPORATION: VEPHO	ldings Inc.	
DOCUMENT NUMBER: P130000344		
The enclosed Articles of Amendment and fee are su	bmitted for filing.	
Please return all correspondence concerning this ma	tter to the following:	
DAVIS REED		
V E P HOLDIN	<u> </u>	1
13799 PARK E	Firm/ Company	156
107001711112	Address	
SEMINOLE, FI	·	
	City/ State and Zip Code	е
DAVISREED@GM		
E-mail address: (to be us	sed for future annual report	notification)
For further information concerning this matter, pleas	se call:	
DAVIS REED	_{at (} 727	4587748
Name of Contact Person		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 & Certificate of Status	□\$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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Amend Divisio Clifton 2661 E	Address ment Section on of Corporations Building executive Center Circle eassee, FL 32301

Articles of Amendment to Articles of Incorporation

FILED

14 FEB 20 AM 9: 03

V. E. P. HOLDINGS INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

SECRETARY OF STATE
JALLAHASSEE, FLORIDA

P13000034451

(Document Number of Corpora	ation (if known)
Pursuant to the provisions of section 607.1006, Florida Statute its Articles of Incorporation:	s, this Florida Profit Corporation adopts the following amendmen
A. If amending name, enter the new name of the corporati	on:
ImperiCorp	The new
name must be distinguishable and contain the word "corp	oration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	12900 VONN RD C204
(Principal office address MUST BE A STREET ADDRESS)	LARGO, FL 33774
C. Fetan and welling although the will although	40700 PARICELAND #450
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	13799 PARK BLVD #156
	SEMINOLE, FL 33776
D. If amending the registered agent and/or registered offic new registered agent and/or the new registered office ac	
Name of New Registered Agent	
(Flor	rida street address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered a lamfan	
Signature of New Regist	tered 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>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>enes</u>	
X Add	<u>sv</u>	Sally Sr	<u>nith</u>	
Type of Action (Check One)	Title		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				

(Atta	mending or adding ad the additional sheets, if	<u>ditional Articl</u> 'necessary).	es, enter cha (Be specific)	nge(s) here:		
						
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If an	ı amendment provides visions for implement	s for an exchar	nge, reclassifi	cation, or canc	ellation of issued	shares, f:
	(if not applicable, indi	icate N/A)		0110011100		
		<u></u>			·····	
			•	·····		 ,
	· · · · · · · · · · · · · · · · · · ·					

The date of each amendment(s) date this document was signed.	adoption:	, if other than the
Effective date if applicable:		
елесиче date <u>и аррисавіе:</u>	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were are by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	pproved by the shareholders through voting groups. The following statement or each voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	st for the amendment(s) was/were sufficient for approval	
by	(voting group)	
action was not required.	dopted by the board of directors without shareholder action and shareholder dopted by the incorporators without shareholder action and shareholder	
Dated 2/18/20	014	
select	director, president or other officer – if directors or officers have not been ted, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)	
	DAVIS REED	
	(Typed or printed name of person signing)	
	CEO	
	(Title of person signing)	

TALLAHASSEE, FLORIDA