

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000254955 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : PAUL SALVER, P.A.

Account Number : I20020000087

Phone : (954)389-1333

Fax Number : (954)389-1397

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Pmail?	Address:			

## COR AMND/RESTATE/CORRECT OR O/D RESIGN VPO SALES CORP

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$43.75

Electronic Filing Menu

Corporate Filing Menu

Help

## Articles of Amendment to Articles of Incorporation of

VPO SALES CORP				
(Name of Corporation as	currently filed with the Florida Dept. of State)	,		
P13000077780				
(Documer	it Number of Corporation (if known)			
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this Florida Profit Corporati	on adopts the following a	mendment	ł(5) to
A. If amending name, enter the new pa	me of the corporation:			
			he new	
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	tain the word "carporation," "company," or "in atlon "Corp," "Inc," or "Co". A professional ca tion," or the abbreviation "P.A."	corporated" or the abbi orporation name must cor	reviation ntain the	
B. Enter new principal office address. (Principal office address MUST BE A S	f applicable: TREET ADDRESS )	A. A		
		Po		
		<u>۔۔۔ اِن میں ۔۔۔ اِن میں ا</u>	200	ca-devil
C. Enter new mailing address, if appl	icable:	Ţ.,	<del>-</del> ဂ် ယ	i demonstrati
(Mailing address MAY BE A POST	UPFICE BUX	<u> </u>		14 4
			127	
		<del></del>	314. 84:11.13	
D. If amending the registered agent as new registered agent and/or the ne	nd/or registered office address in Florida, enter the w registered office address:	e name of the	် ထိ	
Name of New Registered Agent	CARLOS I OCHOA			
	2721 EXECUTIVE PARK DRIVE SUIT	 ΓΕ 4		
	(Florida street address)			
New Registered Office Address:	WESTON	lorida 33331		
	(Cin)	(Zip Code)		
. (	hanging Registered Agent: fered agent. I am familiat with and accept the oblig ignature of New Registered Agent, if changing	zations of the position.		

address of each Officer is (Attach additional sheets, Please note the officer/dir	and/or D if necess rector titl		
Executive Officer; CFO : held. President, Treasurer Changes should be noted a change. Mike Jones lea Mike Jones, V as Remove,	= Chief I r, Directo in the fo ves the c	Financial Officer. If an officer/director holds more or would be PTD. Howing manner. Currently John Doe is listed as the proporation, Sally Smith is named the V and S. The:	than one title, list the first letter of each office he PST and Mike Jones is listed as the V. There is see should be noted as John Doe, PT as a Change.
Example: X Change	<u>PT</u>	John Doe	
X Remove	¥	Mike Jones	MHI 18
_X Add	<u>sv</u>	Sally Smith	\$ DM W
Type of Action (Check One)	<u>Title</u>	Name.	Address
1) Change	Р	VANESSA PIEDRAHITA	2721 EXECUTIVE PARK D
Add			SUITE 4
Remove			WESTON, FL 33331
2) Change	Р	CARLOS I OCHOA	2721 EXECUTIVE PARK D
Add	•		SUITE 4
Remove			WESTON, FL 33331
3) Change			
Add			
Remove			
Калюче			
4) Change			
Add			
Remove			****
5) Change			
Add			
Remove			The second secon
Keniove			
n Change			
Add			34 <del>3</del> 00 00 00 00 00 00 00 00 00 00 00 00 00
Remove			

<u>.</u>	
	And the second s

Mach additional sheets, if necessary). (Be specific)		
	<del></del>	
	73.7	
	AL I	4 001
	27	Č
		ζ,
n amendment provides for an exchange, reclassification, or cancellation of issued shar		-
ovisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	10.75	
	- Şm	i
	<u> </u>	
	·	

The date of each amendment(s) adoption: 10/1/2014 date this document was signed.	, if other than the
+0/+/0044	
Effective date if applicable: 10/1/2014 (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	1 The second
by	
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 10/30/2014  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)	
CARLOS I OCHOA	_
(Typed or printed name of person signing)	_
PRESIDENT	
(Title of person signing)	-