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COVER LETTER

TO: Amendment Section Division of Corporations			_		
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NAME OF CORPORATION:	- VEAT	TALKS STU LACK	DONILLECTIC.		
DOCUMENT NUMBER:	+140	0345039			
The enclosed Articles of Amend	ment and fee are sub	omitted for filing.			
Please return all correspondence	concerning this mat	ter to the following:			
	Kir	K PAMACHO			
	SEA	Name of Contact Person	MATIONALTW	<u>C.1</u>	
	100	Firm/ Company	na C. U.	14011	
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	, 4	City/ State and Zip Code			
	VPB C	EDDU YTT (MO		
E-m	ail address: (to be us	ed for future annual report	notification)		
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For further information concern	ing this matter, pleas	e call:		発展を	•
Mirk G	amacab	at (305	778-6631	P3	<i>i</i> i
Name of Contact	: Person	Area Co	de & Daytime Telephone	Number N	
Enclosed is a check for the folio	owing amount made	payable to the Florida Dep	artment of State:	mar I	e a g
S35 Filling Fee □S4	43.75 Filing Fee & ertificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	2: 13 FL	
Mailing Add		Street	Address Iment Section		
Amendment S Division of C		Divisio	on of Corporations		
P.O. Box 632 Tallahassee, l		The C 2415	entre of Tallahassee N. Monroe Street, Suite	810	
i attanassee, i	Carlo	Tallah	assee, FL 32303		

Articles of Amendment

to
Articles of Incorporation

SERROXI	ALBERTALIONAL TOC.
(Name of Corporation as current	ntly filed with the Florida Dept. of State)
(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corporation:	
	Thenew
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp." "Inc," or "Co", "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must contain the word
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 adnew registered agent and/or the new registered office address Name of New Registered Agent	ddress in Florida, enter the name of the ress:
(Florida s	street address)
New Registered Office Address:	City) , Florida(Zip Code)
New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent. I am familia. Signature of New Check if applicable The amendment(s) is/are being filed pursuant to s. 607,0120 (1)	w 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)

٠,

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> <u>Johr</u>	<u>ı Doe</u>	
X Remove	<u>V</u> <u>Mik</u>	e Jones	
<u>X</u> Add		y Smith	
Type of Action (Check One)	<u>Title</u>	Kirk Camaclo	Address
1) Change	VP/S	HIRK CAMACIO	13335 SU 138715.
Add Remove	·		UNIT 104 MIAMIL PLORIDA 33186
2) Change			
Add			
Remove Change			5 702 TO RECEIVE TO THE RESERVE TO T
Add			- <u> </u>
Remove			P 1
4) Change			- Fig. 2:
Add			
Remove			
5) Change			
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6) Change			
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an amendme	nt provides for a implementing th	n exchange, rec	dassification,	or cancellatio	n of issued sha	ires,	
rovisions for	implementing th	e amendment i	f not containe	d in the amen	id <u>ment itself:</u>		
(if not app	licable indicate N	/A)					
Cp · Tr							
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The date of each amendment(s) a date this document was signed.	doption:	, if other than the
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 50 days after amenament fact date)	
Note: If the date inserted in this bedocument's effective date on the D	block does not meet the applicable statutory filing requirements, this department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ad action was not required.	opted by the incorporators, or board of directors without shareholder act	ion and shareholder
☐ The amendment(s) was/were ad by the shareholders was/were s	opted by the shareholders. The number of votes east for the amendment ufficient for approval.	(s)
☐ The amendment(s) was/were ap must be separately provided for	proved by the shareholders through voting groups. The following staten reach voting group entitled to vote separately on the amendment(s):	rent
"The number of votes cas	t for the amendment(s) was/were sufficient for approval	
by	(voting group)	
Dated	2/2/24/2/2000	Z0Z4 A SECR
Signature	Of a house not been	
(By a c	director, president or other officer - if directors or officers have not been	
select	ed, by an incorporator – if in the hands of a receiver, trustee, or other counted fiduciary by that fiduciary)	
арроп	ned Hancing by that Adversary	ပΩ 👅 ့ 🖟
	MIRK LAMACHO	
	(Typed or printed name of person signing)	
	VP/S.	် ကြ ယ
	(Title of person signing)	