

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6380

From:

Account Name : EAGLE TAX REPRESENTATION, CORP

Account Number: 120070000037

: (954)532-3842

Phone Fax Number

: (954)532-3847

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

COR AMND/RESTATE/CORRECT OR O/D RESIGN DOCTOR CELL USA INC

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Corporate Filing Menu

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A0/11/16

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: DOCTOR CELL C	JSA INC	
DOCUMENT NUMBE			
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspond	ondence concerning this ma	tter to the following:	
מ	ORIVAL R GONCALVES	;	
_		Name of Contact Person	n
E	AGLE TAX REPRESENT.	ATION, CORP	
_		Firm/ Company	
5-	493 WILES ROAD SUITE		
		Address	
C	OCONUT CREEK FL 330	73	
_		City/ State and Zip Cod	c
@qlu8 c	eagle-tax.com		•• ••
		sed for luture annual report	notification) ···
	·	·	
For further information of	concerning this matter, please	se call;	
Paulo Oliveira, EA		954	532-3842
Name of	Contact Person	Arca Co	de & Daytime Telephone Number
Enclosed is a cheek for t	he following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing F∞ Certificate of Status Certified Copy (Additional Copy is enclosed)
Amena Divisio P.O. B	ng Address dment Section on of Corporations ox 6327 assee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations a Building Executive Center Circle assec, FL 32301

08/11/2015 12:39PM FAX



Articles of Amendment to Articles of Incorporation of

DOCTOR CELL USA INC	
Name of Corporation as curren	the filed with the Florida Dept. of State)
P14000050645	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, this Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)
L. If amending name, enter the new name of the corporation:	
VOO NACIONAL, INC	The many
name must he distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp." "Inc." or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	1066 W SAMPLE ROAD
(Principal office address MUST BE A STREET ADDRESS)	POMPANO BEACH, FL 33064
C. Enter new mailing address, if applicable: (Muiling address MAY BE A POST OFFICE BOX)	1066 W SAMPLE ROAD POMPANO BEACH, FL 33064
If amending the registered agent and/or registered office addresses registered agent and/or the new registered office addresses Name of New Registered Agent	
(Florida s	weet address)
New Registered Office Address:	, Florida
	(City) (Lip Code)
New Registered Agent's Signature, if changing Resistered Agent is the appointment as registered agent. I am familian	<u>it;</u> with and accept the obligations of the position.
Cinautous of Manu	Parintered Agant Schaming

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; $C = Chairman\ or\ Clerk$; $CEO = Chief\ Fixecutive\ Officer$; $CFO = Chief\ Financial\ Officer$. 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 numed 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 Ooe	
X Remove	<u>v</u>	Mike Jones	
_X	<u>\$V</u>	Sally Smith	
Type of Action (Check One)	Title	Name	Address
1) X Change	P	Doríval R Gonçalves	1066 W SAMPLE ROAD
Add			POMPANO BEACH FL 33064
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6)Change			
Add			
Remove			

Attach additional sheets, if necessary).	cles, enter change(s) here: (Be specific)
for an an and described for an analysis	once and ordered for the or concelled and investigation
provisions for implementing the amer	ange, reclassification, or cancellation of issued theres, adment if not contained in the amendment itself:
12Come on allowed to decide at a \$1/45	
(if not applicable, indicate N/A)	

The data of seak amonday and a data to a	08-06-2015	
The date of each amendment(s) adoption:date this document was signed.		, if other than th
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does document's effective date on the Department of	not meet the applicable statutory filing requirements, this date will f State's records.	not be listed as the
Adoption of Amendment(s) (CI	HECK ONE)	
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	shareholders. The number of votes cast for the amendment(s) approval.	
The amendment(s) was/were approved by the must be separately provided for each voting	the shareholders through voting groups. The following statement g group entitled to vote separately on the amendment(s):	
"The number of votes cast for the ame	endment(s) was/were sufficient for approval	
by		
(ro	oting group)	
☐ The amendment(s) was/were adopted by the action was not required.	board of directors without shareholder action and shareholder	
The amendment(s) was/were adopted by the action was not required.	incorporators without shareholder action and shareholder	
08-06-2015 Dated Signature 9	The second of th	
(By a director, pre-	sident or other officer - if directors or officers have not been	<u> </u>
	corporator – if in the bands of a receiver, trustee, or other court by by that fiduciary)	
DORIVA	AL R GONCALVES	
	(Typed or printed name of person signing)	
PRESID	DENT	
	(Title of nerson signing)	