## P14000061481

(Requestor's Name)				
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CORLORATION.

NOV 28 2016

C LEWIS

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPORA	TION:	RVICE INC	
DOCUMENT NUMBE	R: P14000061481		
	Amendment and fee are su	ibmitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
R	AFAEL VASCONEZ		
_		Name of Contact Person	n
R	EV MULTI SERVICE INC		
-		Firm/ Company	
13	735 NE 157 TER	,,,	
<del></del>	·····	Address	
M	IIAMI, FL. 33162		
_		City/ State and Zip Cod	e
REVMU	JLTISERVICE@AOL.CO	М	
	E-mail address: (to be us	sed for future annual report	notification)
For further information c	oncerning this matter, pleas	se call:	
VALDIRCE ROSA		at (	de & Daytime Telephone Number
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check for the	ne 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 Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Amend Divisio P.O. B	g Address ment Section n of Corporations ox 6327 ussee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

FILLU SECRETARY OF STATE DIVISION OF CORFORATIONS

## Articles of Amendment to Articles of Incorporation of

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VAL MULTI SERVICE INC	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P14000061481	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
<u> </u>	The new
name must be distinguishable and contain the word "corporation "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: (Principal office address MUST BE A STREET ADDRESS)	
(Trincipal Office address MOST 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 addr new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida stre	et address)
New Registered Office Address:	, Florida
f	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligations of the position.
Signature of New Re	gistered 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)

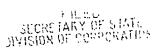
Please note the officer/director title by the first letter of the office title:

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	nith	
Type of Action (Check One)	<u>Title</u>		Name	Address
1) Change	<u>V</u>		PHILLIP ROSA	13501 NE. MIAMI CT
XX Add				MIAMI FL 33161
Remove				
2) Change	····	<u> </u>		
Add				
Remove				
3) Change				-
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change				
Add		_		
Remove				
6) Change		_		····
Add				
Remove				

If amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)
If an amendment provides for an exch provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
- Visite - V	
	· · · <del></del>



The date of each amendment(s)	adoption:		, if other than the
date this document was signed.		2016 NOV 21 PM 1: 29	
	/02/2016		
Effective date <u>if applicable</u> :	(no more than 90 de	lays after amendment file date)	
Note: If the date inserted in this document's effective date on the	block does not meet the applicable Department of State's records.	le statutory filing requirements, this date wil	Il not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )		
The amendment(s) was/were a by the shareholders was/were		umber of votes cast for the amendment(s)	
☐ The amendment(s) was/were a must be separately provided j	pproved by the shareholders throug for each voting group entitled to vot	th voting groups. The following statement te separately on the amendment(s):	
"The number of votes ca	st for the amendment(s) was/were so	ufficient for approval	
by			
	(voting group)		
☐ The amendment(s) was/were a action was not required.	dopted by the board of directors wit	thout shareholder action and shareholder	
☐ The amendment(s) was/were a action was not required.	dopted by the incorporators without	t shareholder action and shareholder	
11/02/20 Dated	16	_	
	whose.		
(By a selec		- if directors or officers have not been ands of a receiver, trustee, or other court	
	VALDIRCE ROSA		
	(Typed or printed nan	me of person signing)	<del></del>
	PRECIDENT		
	(Title of p	person signing)	<del></del>

11/02/2016