P14000069163

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APR 07 2016 C. CARROTHERS

COVER LETTER.

TO: Amendment Section Division of Corporations

4

NAME OF CORPOR	ATION: LCV INVESTMEN	NT INC.	
DOCUMENT NUMB			
The enclosed Articles a	of Amendment and fee are su	bmitted for filing.	
Please return all corresp	pondence concerning this ma	tter to the following:	
I	MARIA M CASTRO GONZ	ALEZ	
-		Name of Contact Person	1 .
-		Firm/ Company	
	2810 CONCORD RD		
-		Address	
]	DELAND, FL 32720		
		City/ State and Zip Cod	e
maria.	gonzalez0304@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further information	concerning this matter, pleas	se call:	
MARIA M XASTRO	GONZALEZ	at (<u>386</u>	717-6438
Name o	f Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	the 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)
Amer Divis P.O.	ing Address ndment Section sion of Corporations Box 6327 hassee, FL 32314	Ameno Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301

Articles of Amendment to Articles of Incorporation

to

			INC.

P14000069163	ly filed with the Florida Dept. o	f State)
14000007103		
(Document Number o	f Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this is Articles of Incorporation:	Florida Profit Corporation adop	
A. If amending name, enter the new name of the corporation:		APR - L
ame must be distinguishable and contain the word "corporatio Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or ' ord "chartered," "professional association," or the abbreviation	'Co". A professional corporation	ted" or the abbreviation
B. Enter new principal office address, if applicable:	NA	and on
Principal office address MUST BE A STREET ADDRESS)	NA	
	NA	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA	
	NA	
	NA	•
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address		of the
Name of New Registered Agent NA		
NA NA		
(Florida str	reet address)	
	C	NA
NA New Registered Office Address:	P	lorida

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.

Example: X Change	<u>PT</u>	John De	<u>oe</u>	
X Remove	<u>v</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally S	mith	
Type of Action (Check One)	<u>Title</u>		Name	Addregs
1) Change	<u>V</u>		CAIO DE BRITO VIANNA	2810 CONCORD RD
X Add				DELAND, FL 32720
Remove				
2) Change		_		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change				
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

E.• <u>If a</u> Atta	mending or adding additional Articl ach additional sheets, if hecessary).	es, enter change (Be specific)	(s) here:			
NA	· · · · · · · · · · · · · · · · · · ·	, F J. J				
						
			,			
·	·			•		
						
					 	
						<u> </u>
F. <u>If a</u> <u>pr</u>	n amendment provides for an excha ovisions for implementing the amend	nge, reclassifica Iment if not con	tion, or cancel tained in the a	lation of issued	d shares, elf:	
	(if not applicable, indicate N/A)					
NA						
	, .					
 -						
					······································	

	04/01/2016		
The date of each amendment(s) date this document was signed.	adoption:		_, if other than th
	01/2016		
Effective date <u>if applicable</u> :	(no more than 90 days a	fter amendment file date)	
Note: If the date inserted in this document's effective date on the I		tutory filing requirements, this date will r	not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)		
☐ The amendment(s) was/were as by the shareholders was/were:	lopted by the shareholders. The number sufficient for approval.	of votes cast for the amendment(s)	
	oproved by the shareholders through voti or each voting group entitled to vote sepa		
"The number of votes can	t for the amendment(s) was/were suffici	ent for approval	
by	(voting group)		
	(voting group)		
☐ The amendment(s) was/were action was not required.	dopted by the board of directors without	shareholder action and shareholder	
The amendment(s) was/were a action was not required.	dopted by the incorporators without shar	eholder action and shareholder	
04/01/20 Dated	6		
Dated	India a		
Signature	Welling 6		_
	director, president or other officer - if d		
	ed, by an incorporator – if in the hands on the fiduciary by that fiduciary)	of a receiver, trustee, or other court	
	MARIA M CASTRO GONZALEZ		
	(Typed or printed name of	person signing)	
	PRESIDENT		
	(Title of persor	n signing)	