Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

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From:

Account Name

: MONEY TRUST FINANCIAL SERVICES, LLC

Account Number : I20140000079

Phone

: (305)387-0076

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INCAVECA CORP

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Corporate Filing Menu

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: Incaveca Corp DOCUMENT NUMBER: P14000080233 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: **Carlos Martinez** Name of Contact Person Money Trust Accounting and Tax Services Firm/ Company 14335 SW 120 ST STE 110 Address Miami, FL 33186 City/ State and Zip Code cim@mtats.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Carlos Martinez Name of Contact Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount made payable to the Florida Department of State: ☐S43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee S35 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is **Certified Copy** enclosed) (Additional Copy is enclosed)

Maijing Address
Amendment Section
Division of Corporations
P.O. Box 6327
Totlahassee, FL 32314

Street Address : Amendment Section
Division of Corporations
Clifton Building : 2661 Executive Center Circle : Tallahassee, FL 32301

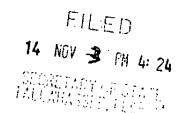
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Articles of Amendment to Articles of Incorporation of



Incaveca Corp		• • •
(Name of Cornoration as currently filed with the Florida Dept. of State)		
P14000080233		
(Document Number of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adoptits Articles of Incorporation:	ts the following a	imendment(s) to
A. If amending name, enter the new name of the corporation;		
	7	he new
name must be distinguishable and contain the word "corporation," "company," or "incorporation," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation word "chartered," "professional association," or the abbreviation "P.A."	led" or the abb	reviation
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 address in Florida, enter the name new registered agent and/or the new registered office address;	of the	•
Name of New Registered Agent		
	•	
(Florida street address)		
New Registered Office Address:, Florida,		
(Cin)	(Zip Code)	
New Registered Agent's Signature, if changing Registered Agent:		· .· ·
Thereby accept the oppointment as registered agent. I am familiar with and accept the obligations of	f the position.	Francisco (gartino)
Signature of New Registered Agent, if changing	# . A.	
Grand - 2)	•	•

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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 D	<u>oc</u>		
X Remove	¥	Mike Jo	ones		
X Add	<u>sv</u>	Sally S	<u>mith</u>		
Type of Action (Check One)	Title		Name		<u>Addres</u> s
1) Change	VP		Maria Mesa	****	14335 SW 120 ST
Add					STE 110
Remove					Miami, FL 33186
2) Change					
Add					
Remove					
3) Change			_		
Add				•	
Remove					
4) Change				<u> </u>	
Add					
Remove					
5) Change					***************************************
Add					
Remove				to ke sto	
6) Change			<u></u>		
Add					
Remove					<u>: : : : : : : : : : : : : : : : : : : </u>

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	No. and the second second		
E. If amending or a (Attach additional	dding additional Articles, enter change(s) h sheets, if necessary). (Be specific)	<u>tre</u> :	
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provisions for i	t provides for an exchange, reclassification, mplementing the unrendment if not contains	or cancellation of issued shares, al in the amendment Itself:	
(if not appli	cable, Indicate N/A)		

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The date of each amendment(s) adopted date this document was signed.	ion:				_, if other than the
Effective date if applicable:	(no more than 90) days after amendi	nent file date)		· · · · · · · · · · · · · · · · · · ·
Adoption of Amendment(s)	(CHECK ONE)			···	,
I he amendment(s) was/were adopted by the shareholders was/were sufficient		number of votes ca	st for the amend	ment(s)	
The amendment(s) was/were approve must be separately provided for each					
"The number of votes cast for t	he amendment(s) was/were	sufficient for appr	roval		
	(voting group)			•	,
The amendment(s) was/were adopted action was not required.			:		
The amendment(s) was/were adopted action was not required.	by the incorporators with	out shareholder act	ion and sharehol	der	
Dated 10/7/2014	milo Vascal				
(By a direct selected, by	or, president of the offic on incorporator – if in the iduciony by that fiduciary)				-
Ca	milo Vargas		:		
Pre	esident	rinted name of pers			-