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C. GOLDEN MAY -2 2019

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: SFC SERVICE	ES CORP	
DOCUMENT NUMBER: P15000026431		
The enclosed Articles of Amendment and fee a	re submitted for filing.	
Please return all correspondence concerning this	s matter to the following:	
SAULO F CAMPOS		
-	Name of Contact Person	
SFC SERVICES CORP		
	Firm/ Company	· · · · · · · · · · · · · · · · · · ·
9402 GETTYSBURG RO	DAD	
	Address	
BOCA RATON FL 3343	34	
	City/ State and Zip Code	
SAULOCAMPOS93@GMAII	COM	
	be used for future annual report no	tification)
	•	,
For further information concerning this matter, p	please call:	
SAULO F CAMPOS	at ()	305-6355
Name of Contact Person	Area Code	& Daytime Telephone Number
Enclosed is a check for the following amount m	ade payable to the Florida Departn	nent of State:
■ \$35 Filing Fee □\$43.75 Filing Fee Certificate of State		\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address	Street Ad	
Amendment Section Amendment Section		
Division of Corporations	Division of Corporations	
······································		_
P.O. Box 6327 Tallahassee, FL 32314	Clifton Bu	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

SFC SERVICES CORP

FILED

2018 APR 30 PM 2: 25

	WI 1 1/1 1 12 12 12 12 12 12 12 12 12 12 12 12	
		ept. of State) SECHETARY OF STAT TALLAHASSEE, FLORI
P150000264		
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Associates of Incorporation:	Florida Profit Corporation	adopts the following amendment(s) to
. If amending name, enter the new name of the corporation:		
ame must be distinguishable and contain the word "corporation" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Corp." or the abbreviation "I	Co". A professional corp	
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)		
 If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address: 		ame of the
Name of New Registered Agent		
(Florida stre	et address)	
New Registered Office Address:		. Florida
	City)	(Zip Code)
lew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar w	ith and accept the obligati	ons of the position.
Signature of New Re	gistered Agent, if changing	2

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 = Treusurer; 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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	PAULO ROBERTO CAMPOS	1411 NE 41st DRIVE
X Add			POMPANO BEACH FL
Remove			33064
2) Change	D	RENATO RIBEIRO TEIXEIRA	18100 BENDIND WILLOW CT
X Add			PUNTA GORDA FL
Remove			33982
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			-
Add			·
Remove			
6) Change			
Add	-		
Remove			

	(Be specific)
1 - To - T	
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,	
If an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
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provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
provisions for implementing the ame	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:

04/25/2018	
The date of each amendment(s) adoption:, if other date this document was signed.	than the
Effective date if applicable:	
Effective date if applicable: (no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed document's effective date on the Department of State's records.	ed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.	
The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by" (voting group)	
(voting group)	
The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
04/25/2018	
Signature Augus	
(By a director, president or other officer – if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
SAULO F CAMPOS	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	