P15000050703

(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phon	e #)
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TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: ValeMiami PA				
DOCUMENT NUME					
	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this ma	tter to the following:			
	Angelita Vale				
	Name of Contact Person				
		Firm/ Company	· · · · · · · · · · · · · · · · · · ·		
	3900 North Ocean Drive #75	3			
		Address			
	Lauderdale by the Sea, FL 33	3308			
		City/ State and Zip Cod	e		
doug(@williamsaa.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	n concerning this matter, pleas	se call:			
Angelita Vale		at (588-8369		
Name o	of Contact Person	Area Co	de & Daytime Telephone Number		
Enclosed is a check for	r 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)		
<u>Mai</u>	ling Address	Street	Address		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

ValcMiami PA (Name of Corporation as currently filed with the Florida Dept. of State) P15000050703 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: Angelita de Almeida Vale PA name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." 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 of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position. Signature of New Registered 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.

Example: 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>	<u>Addres</u> s	
1) Change				
Add				
Remove				
2) Change				
Add				
Remove			<u> </u>	JAT 38
3) Change				
Add			-	ARY
Remove				E SE
4) Change			#: Op	TATE ORIDA
				➣
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Damoua				

Effective date <u>if applicable</u> :			_
	(no more than 90 days after amendment file date)		
Note: If the date inserted in this be document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date will n partment of State's records.	ot be list	ed as the
Adoption of Amendment(s)	(CHECK ONE)		
The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.		
	proved by the shareholders through voting groups. The following statement 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)		
☐ The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholder	15 JUN	SECRE:
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	18 F	TARY A
Dated_X	06/15/15	PH 4: 04	OF STATE
Signature X	good) A
selecte	frector, president or other officer – if directors or officers have not been d, by an incorporator – if in the hands of a receiver, trustee, or other court led fiduciary by that fiduciary)		
	Angelita Vale		
	(Typed or printed name of person signing)		-
	President		
	(Title of person signing)		-