## PISCURE LOTTZLO

| (Requestor's Name)   |
|--|
| (Address)  |
| (Address)  |
| (City/State/Zip/Phone #)   |
| PICK-UP WAIT MAIL  |
| (Business Entity Name)   |
| (Document Number)  |
| Certified Copies Certificates of Status  |
| Special Instructions to Filing Officer:  |
| Valumica (: Kunipun  |
| Advised to remine  |
| Victions to Filling Officer.  Viction (Achipich  Adviscd to himself  The fart purple  (1544 number 3/1/20) |
| Office Use Only  |



400346810524

07/02/20--01011--015 \*\*52.50

2020 (\*\*) -2 Fil 4: 02

Anundrics

AUG 15 2020 I ALBRITTON

## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

| NAME OF CORPORATION: VECQINC.   |
|---|
| DOCUMENT NUMBER:  |
| The enclosed Articles of Amendment and fee are submitted for filing.  |
| Please return all correspondence concerning this matter to the following:   |
| VERONICA E. CHAMPION  Name of Contact Person  |
| VECZ INC Firm/Company  2937 BEACH BIVD S  Address   |
| Address  GUEPORT F1 33707  City/ State and Zip Code   |
| VERONICA, CHAMPION @ GMAIL I CON<br>E-mail address: (to be used for future annual report notification)  |
| For further information concerning this matter, please call:  |
| VERONICA E. CHAMPION 727) 346-9800  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:   |
| S35 Filing Fee  Certificate of Status  Certified Copy (Additional copy is enclosed)  S43.75 Filing Fee & Certified Copy (Additional Copy is enclosed) |
| Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of Corporations                                       |

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## Articles of Amendment

to

Articles of Incorporation

of

| · <del></del>  | y filed with the Florida Dept. of S                             | itate)   |
|--|---|--|
| (Document Number of  | Corporation (if known)  |  |
| arsuant to the provisions of section 607.1006, Florida Statutes, this Articles of Incorporation:   | Florida Profit Corporation adopts                               | the following amendment(s                        |
| If amending name, enter the new name of the corporation:   |   |  |
| NIA  |   | The new  |
| me must be distinguishable and contain the word "corporation," "c<br>nc.," or Co.," or the designation "Corp," "Inc," or "Co". A<br>chartered," "professional association," or the abbreviation "P.A." | ompany," or "incorporated" or the professional corporation name | e abbreviation "Corp.,"<br>must-contain the word |
| Enter new principal office address, if applicable:   | N/A   |  |
| rincipal office address MUST BE A STREET ADDRESS )   |   | 7021   |
|  | <del> </del>  |  |
|  |   |  |
| Enter new mailing address, if applicable:  | A1/A  | r's  |
| (Mailing address MAY BE A POST OFFICE BOX)   |   |  |
|  |   | <u> </u>   |
|  |   | 02   |
| . If amending the registered agent and/or registered office addr   | ess in Florida, enter the name of                               | the  |
| new registered agent and/or the new registered office address:   |   |  |
| Name of New Registered Agent   | NA  |  |
|  |   |  |
| (Florida stre  | eet address)  | <del></del>                                      |
|  | Wlo.  |  |
| New Registered Office Address:   | , F10   | rida   |

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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 <math>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:<br>X Change       | <u>PT</u> <u>John</u> ] | Doe              |                         |
|----------------------------|-------------------------|------------------|-------------------------|
| X Remove                   | <u>V</u> <u>Mike</u>    | Jones .          |                         |
| <u>X</u> Add               | <u>SV</u> <u>Sally</u>  | <u>Smith</u>     |                         |
| Type of Action (Check One) | <u>Title</u>            | <u>Name</u>      | Address                 |
| 1) X Change                | PT                      | VERONICA E. Cham | 200 2937 BEACHBLIA      |
| Add                        |                         |                  | GUFFORT F 3370          |
| Remove                     | VPS                     | ALLAN BISHOP     | 4134 48 Th ST S         |
| 2} Change                  |                         | 1301119          | ST PETERS burg Fl 3371, |
| Remove Change              |                         |                  |                         |
| Add                        |                         |                  |                         |
| Remove                     |                         |                  |                         |
| 4) Change                  |                         |                  |                         |
| Add                        |                         |                  |                         |
| Remove                     |                         |                  |                         |
| 5) Change                  |                         |                  |                         |
| Add                        |                         |                  |                         |
| Remove                     |                         |                  |                         |
| 6) Change                  |                         | 41-71            |                         |
| Add                        |                         |                  | <del></del>             |
| Remove                     |                         |                  |                         |

| Attach additional sheet                      | z additional Artic<br>ts, if necessary). | (Be specific)                         |                         |                 |                |              |
|--|--|---------------------------------------|-------------------------|-----------------|----------------|--------------|
|  |  |                                       |                         |                 |                |              |
|  | <del></del>                              |                                       | ·                       |                 |                |              |
|  |  | · · · · · · · · · · · · · · · · · · · |                         | -               | _              |              |
|  |  |                                       |                         |                 |                |              |
|  |  |                                       |                         | <del></del> -   |                | _            |
|  |  |                                       | ·-                      |                 | <del>.</del> . |              |
|  |  |                                       |                         |                 |                |              |
| <u>.</u>                                     | <del></del>                              |                                       |                         |                 | <u></u>        |              |
|  |  |                                       |                         |                 |                |              |
| •  |  |                                       | -                       |                 | -              |              |
|  | ····                                     | _                                     |                         |                 |                |              |
|  |  |                                       |                         |                 |                |              |
|  |  |                                       | -                       |                 |                |              |
|  |  |                                       |                         |                 |                |              |
|  |  |                                       |                         |                 |                |              |
|  |  | <del></del>                           |                         |                 |                |              |
|  |  |                                       |                         |                 |                |              |
|  |  | <del></del>                           |                         |                 |                |              |
|  |  |                                       |                         |                 |                |              |
|  |  |                                       |                         |                 |                |              |
|  |  |                                       |                         |                 |                | ,            |
|  |  |                                       |                         | *               |                |              |
|  |  |                                       |                         |                 |                |              |
|  | · <del>-</del>                           |                                       | ·                       |                 |                |              |
|  |  |                                       |                         |                 |                |              |
|  |  |                                       |                         |                 | _              |              |
| f an amendment pro-<br>provisions for implei | vides for an exch                        | ange, reclassific                     | ation, or cancell       | ation of issued | l shares,      |              |
| (if not applicable,                          | indicate N/A)                            | ndinent it not co                     | mtam <u>ça in the a</u> | menoment us     | <u></u>        |              |
| NIA  |  |                                       |                         |                 |                |              |
| ~ / /·                                       | <del></del>                              |                                       |                         |                 |                |              |
|  |  |                                       |                         |                 |                |              |
|  |  |                                       | _                       |                 |                |              |
| <del>_</del>                                 |  |                                       |                         |                 |                |              |
|  |  |                                       |                         |                 |                |              |
|  | <u> </u>                                 |                                       |                         |                 |                |              |
|  | <u> </u>                                 |                                       | <del></del> .           |                 |                |              |
|  |  |                                       |                         | <del></del>     |                |              |
|  |  |                                       |                         | ·               | Zu .           |              |
|  |  |                                       |                         | , <del>.</del>  |                | <del>-</del> |

| The date of each amendment(s) adoption:  | , if other than the                 |
|--|-------------------------------------|
| date this document was signed.   |                                     |
| Effective date if applicable: 500 28, 2020  (no more than 90 days after amendment file date)   |                                     |
| (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, document's effective date on the Department of State's records.                         | this date will not be listed as the |
| Adoption of Amendment(s) (CHECK ONE)   |                                     |
| The amendment(s) was/were adopted by the incorporators, or board of directors without sharehol action was not required.  | der action and shareholder          |
| ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amending by the shareholders was/were sufficient for approval.                                     | ndment(s)                           |
| ☐ The amendment(s) was/were approved by the shareholders through voting groups. The following must be separately provided for each voting group entitled to vote separately on the amendment | statement<br>(s):                   |
| "The number of votes east for the amendment(s) was/were sufficient for approval  |                                     |
| by PIPST (voting group)  |                                     |
| Signature    Complete   Complete   | ot been<br>her court                |
| (Typed or printed name of person signing)  |                                     |
| (1 yped of printed name of person signing)   |                                     |
| PT   |                                     |
| (Title of person signing)  |                                     |