## P16000035307

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPORATION: VULCAINE CORP.					
DOCUMENT NUMBER: P16000025307					
	of Amendment and fee are su	bmitted for filing.			
Please return all corre	spondence concerning this ma	tter to the following:			
MARTIN BERGOMI					
	<del>- ::</del>	Name of Contact Person			
	VULCAINE CORP.				
		Firm/ Company			
	75 N WOODWARD AVE #85936				
	Address				
	TALLAHASSEE, FL 32313				
		City/ State and Zip Code			
MAR	TIN.BERGOMI@GMAIL.CO	OM			
	E-mail address: (to be us	ed for future annual report n	otification)		
For further information	n concerning this matter, pleas	e call:			
MARTIN BERGOMI		at (	539-4740		
Name of Contact Person Area Code & Daytime Telepho		e & Daytime Telephone Number			
Enclosed is a check for the following amount made payable to the Florida Department 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)		
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address  Amendment Section  Division of Corporations  Clifton Building  2661 Executive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

VULCAINE CORP.						
(Name	of Corporation as currently	y filed with the Florida Der	ot, of State)			
P16000025307						
	(Document Number of	Corporation (if known)	<del></del>			
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this I	Florida Profit Corporation a	idopts the fol	lowing am	endme	nt(s)
A. If amending name, enter the new n	ame of the corporation:					
N/A				The	new	,
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	nation "Corp," "Inc," or "Cation," or the abbreviation "I	Co". A professional corpor	orated" or ration name	the abbrev	viation	
B. Enter new principal office address, (Principal office address MUST BE A S				A S	_65	Ţ.
(Trincipal office dudress MOST BE AS	TREET ADDRESS )			787	22	
				#\#	200	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		VULCAINE CORP.		76180 J.	AM 8: 47	U
		75 N WOODWARD AVI	E #85936			
		TALLAHASSEE, FL 323	313			
D. If amending the registered agent an new registered agent and/or the ne			me of the			
Name of Nav Boolstoned Annua	N/A		•			
Name of New Registered Agent			<u> </u>			
	(Florida stre	and and durant				
	N/A	ei auuress)				
New Registered Office Address:		(City)	_, Florida	(Zip Code)		
	,	City)		(Zip Coue)		
New Registered Agent's Signature, if c I hereby accept the appointment as regis		with and accept the obligation	ns of the posi	ition.		
	Signature of New Re	egistered Agent if changing		<del></del>		

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 Doe	
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	PD	MARTIN BERGONI	3030 N ROCKY POINT DR
Add			TAMPLA, FL. 33607
X Remove			
2) Change	TD	MARCELO G BERGONI	3030 N ROCKY POINT DR
Add			TAMPLA, FL. 33607
X Remove			
3) Change	PST	MARTIN BERGOMI	CATAMARCA ST. 166
X Add			MARTINEZ, B1641CSD
Remove			BUENOS AIRES, ARGENTINA
4) Change	<u>v</u>	MARCELO G BERGOMI	CATAMARCA ST. 166
X Add			MARTINEZ, B1641CSD
Remove			BUENOS AIRES, ARGENTINA
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

(Attach additional sheets, if necessary). N/A	(Be specific)
. ====	
<del></del>	
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· date this document was signed.	ioption:	it other than the
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	lock does not meet the applicable statutory filing requirements, this date will not partment of State's records.	t be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adop by the shareholders was/were suf	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved 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 f	for the amendment(s) was/were sufficient for approval	
by		
,	(voting group)	
The amendment(s) was/were adoption was not required.	pted by the board of directors without shareholder action and shareholder	
The amendment(s) was/were adoption was not required.	pted by the incorporators without shareholder action and shareholder	
08/01/2016		
DatedSignature	Parter Berger	
(By a di	rector, president or other officer - if directors or officers have not been	
	by an incorporator - if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
1	MARTIN BERGOMI	
•	(Typed or printed name of person signing)	
	PST	
-	(Title of person signing)	******