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OCT 17 2016

R. Wetter

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: VALMAR SER	RVICES CORP	
DOCUMENT NUMBER: P16000067375		
The enclosed Articles of Amendment and fee are	e submitted for filing.	•
Please return all correspondence concerning this	matter to the following:	
· ALLIANEIRA YRAUSQ	UIN	
	Name of Contact Person	1
AJM BUSINESS CORP		
-	Firm/ Company	
8925 SW 172ND AVE A	PT 1117	
-	Address	
MIAMI FL. 33196		
	City/ State and Zip Code	
ALIMARBC@GMAIL.COM		
E-mail address: (to be	e used for future annual report	notification)
For further information concerning this matter, p	lease call:	
JOSE LUIS MARCANO VERA	at (⁷⁸⁶	8562253
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount ma	de payable to the Florida Depa	ortment of State:
\$35 Filing Fee Certificate of Status		S52.50 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	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

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Articles of Amendment to Articles of Incorporation

16 OCT 14 AH 10: 59

SECRETARIA EN TATE TAULARAMBEER TRUCA

VALMAR SERVICES CORP (Name of Corporation as currently filed with the Florida Dept. of State) P16000067375 (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: 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." 6239 CURRY FORD RD #86 B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) ORLANDO FL, 32822 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: _, Florida (Zip Code) 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>	<u>John Doe</u>	
X Remove	<u>v</u>	Mike Jones	•
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	Р	ALLIANEIRA YRAUSQUIN	6239 CURRY FORD RD #86
Add			ORLANDO FL, 33324
X Remove			
2) Change	P	JOSE LUIS MARCANO VERA	6239 CURRY FORD RD #86
X Add			ORLANDO FL, 32822
Remove			
3) X Change	<u>A</u>	VIRGINIA NUNEZ	6239 CURRY FORD RD #86
Add		•	ORLANDO FL, 32822
Remove			· · · · · · · · · · · · · · · · · · ·
4) X Change	VP	JEAN VALBUENA SOTO	6239 CURRY FORD RD #86
Add			ORLANDO FL, 32822
Remove			
5) X Change	MGR	FAVIOLA GONZALEZ COLINA	6239 CURRY FORD RD #86
Add			ORLANDO FL, 32822
Remove			
6) Change			
Add			_
Remove			

ich <i>additional sh</i>	ing additional Article reets, if necessary).	(Be specific)			
					
					
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ovisions for imp	lementing the amend	inge, reclassification	tained in the ame	endment itself:	<u>5.</u>
(if not applicab	ble, indicate N/A)				
			 .		
				•	
					· *-

The date of each amendment(s) as date this document was signed.	loption:	_, if other than th
Effective date if applicable:		-
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this be document's effective date on the De	block does not meet the applicable statutory filing requirements, this date will partment of State's records.	not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes east 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.	opted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	opted by the incorporators without shareholder action and shareholder	
10/11/2016	•	
Dated Signature	Children .	
(By a d	irector, 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 ted fiduciary by that fiduciary)	
	ALLIANEIRA YRAUSQUIN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	