## P160000 83764

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## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAVY PRO INC						
P16000083764 DOCUMENT NUMBER:						
			<del></del>			
The enclosed Articles of Amendment and fee are sub	omitted for filing.					
Please return all correspondence concerning this mat	ter to the following:					
YUSVALDISNEIS OSORIO GARCIA						
<del></del>	(Name of Contact Persor	1)				•
NAVY PRO ONC						
	(Firm/ Company)		<u>,</u>			•
4129 W HOLLOWTRAIL DR						
	(Address)		, , , , , , , , , , , , , , , , , , ,			,
TAMPA FL 33624						
	(City/ State and Zip Code	e)				•
YUBAOSORIO@YAHOO.COM			•	with got	<u>ـــ</u>	
E-mail address: (to be use	d for future annual report i	notification)			Z	14
For further information concerning this matter, please call:					+1 AON	r str
YUSVALDISNEIS OSORIO GARCIA	813 at	3 5	262118	Address of the second	70 31	
(Name of Contact Perso		rea Code) (	Daytime Tele	phone Numb	per)	•
Enclosed is a check for the following amount made p	ayable to the Florida Depa	irtment of Sta	te:	- 160	0.0	
■ \$35 Filing Fee	Certified Copy (Additional copy is enclosed)	Certified	te of Status Copy nal Copy is			
Mailing Address		Address				
Amendment Section		lment Section				

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

(Name o	of Corporation as currently filed with the Flor	rida Dept. of State)	
P16000083764			
	(Document Number of Corporation (if kno	wn)	
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, this Florida Profit Corpe	pration adopts the following	amendment(s
A. If amending name, enter the new na	ime of the corporation:		
			The new
	tain the word "corporation," "company," or ation "Corp," "Inc," or "Co". A professionation," or the abbreviation "P.A."		
B. Enter new principal office address, (Principal office address MUST BE A S			<del></del>
C. Enter new mailing address, if appli (Mailing address MAY BE A POST of the Control of the Cont		r the name of the	
new registered agent and/or the nev	v registered office address:	•	
Name of New Registered Agent	YUSVALDINEIS OSORIO GARCIA	The first	 GF)
	4129 W HOLLOWTRAIL DR	The factor of the state of the	<b>香</b> ****
New Registered Office Address:	(Florida street address) TAMMPA	FL33624	gy, and
	(City)	(Zip C	ode)
Navy Descriptored Agent's Signature if a	hansing Registered Agents	7 / 1 · · · · · · · · · · · · · · · · · ·	<u>နာ</u> က တ
New Registered Agent's Signature, if cl I hereby accept the appointment as regist	ered agent. I am familiar with and accept the o	bligations of the position.	
	De la companya della companya della companya de la companya della		

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 X Remove X Add	<u>PT</u> <u>V</u> <u>SV</u>	John Do Mike Jo Sally Si	ones	
Type of Action (Check One)	Title		Name	<u>Address</u>
X Change	P	_	YUSVALDISNEIS OSORIO GARC <b>IA</b>	4129 W HOLLOWTRAIL DR
Add				TAMPA FL 33624
Remove				
2) Change		_		
Add				
Remove	•			
3) Change		_		
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		<del></del> -		
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Arti	icles, enter change(s) here:
E. If amending or adding additional Article (attach additional sheets, if necessary).	(Be specific)
	· · · · · · · · · · · · · · · · · · ·
	7.44

The date of each amendment(s) added this document was signed.	doption:	, if other than the
Effective date if applicable:		
<u></u>	(no more than 90 days after amendment file date)	<del></del>
Note: If the date inserted in this be document's effective date on the De	plock does not meet the applicable statutory filing requirements, this date partment of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add by the shareholders was/were su	opted by the shareholders. The number of votes cast for the amendment(sfficient for approval.	s)
	proved by the shareholders through voting groups. The following statemed each voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were add action was not required.	pted by the board of directors without shareholder action and shareholde	<b>ा</b>
The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
10/28/16 Dated	·	
Signature	X.OS	
	chairman or vice chairman of the board, president or other officer-if di ot been selected, by an incorporator – if in the hands of a receiver, trust ourt appointed fiduciary by that fiduciary)	rectors see, or
YU	SVALDISNEIS OSORIO GARCIA	
	(Typed or printed name of person signing)	<u> </u>
PRE	SIDENT	
	(Title of person signing)	<del></del>