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Florida Department of State

Division of Corporations
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COR AMND/RESTATE/CORRECT OR O/D RESIGN VLADIMIR SUPER CAULKING INC

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Help

TO: Amendment Section

COYER LETTER

Division of Corpo	rations					
NAME OF CORPOR	ATION: VLADIMIR SUPE	R CAULKING INC				
DOCUMENT NUMB	ER: P16000085195					
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.				
Please return all corresp	condence concerning this ma	tter to the following:				
I	Blanca Lacayo					:
_		Name of Contact F	Person		1	-
ĭ	Hadas Accounting And Tax S	Services inc				
•	···	Firm/ Compar	ny		Er.	
2	210 sw 107th Ave				10.	-
-	· · · · · · · · · · · · · · · · · · ·	Address		-	Him.	. 2
}	Miami, Fl 33174				I TO) ,
-		City/ State and Zip	Code			्रे ग
ŀ	adastaxeservices@gmail.com	n.				
_	E-mail address: (to be us	ed for future annual r	report no	tification)	Ť	
For further information	concerning this matter, pleas	se call:				
Blanca Lacayo		at (305	Y	222-2289		
Name of	f Contact Person		ea Code	& Daytime Telephone	Number	
Enclosed is a check for	the following amount made	payable to the Florida	a Departi	ment of State:		
\$35 Filling Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fed Certified Copy (Additional copy in enclosed)		\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Amer Divis P.O. 1	ing Address indment Section ion of Corporations Box 6327 hassee, FL 32314	Ā D T 24	ivision (he Cen 415 N.	Idress ent Section of Corporations tre of Tallahassee Monroe Street, Suite ee, FL 32303	8 10	

Articles of Amendment to Articles of Incorporation of

VT A	ADDAMB.	SITEPR	CATI	KINGING	

A EVANIMING 201 EV CHAPKING BAC	L)	
(Name of Corporation as currently filed	with the Florida Dept. of State)	
P16000085195		
(Document Number of Corpo	ration (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida its Articles of Incorporation:	Profit Corporation adopts the follow	ring amendment(s) to
A. If amending name, enter the new name of the corporation:		
	1	The new
name must be distinguishable and contain the word "corporation," "company "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A profess "chartered," "professional association," or the abbreviation "P.A."	y," or "incorporated" or the abbrevia ssional corporation name must cont	tion "Corp.," aln the word
B. Enter new principal office address, if applicable:	Ŋ	
(Principal office address MUST BE A STREET ADDRESS)		Cz.
	<u> </u>	
	1	
C. Enter new maiting address, if applicable:		1
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
	in the	<u>; = ;</u>
	1 - 1 - 1 - 1 - 1	999
	11	सं ज
D. If amending the registered agent and/or registered office address in I new registered agent and/or the new registered office address:	Florida, enter the name of the	
Name of New Registered Agent		
Hunje of Hew Registered Arent	<u> </u>	_
(Florida street addri	ear) I	_
· ·	[]	
New Registered Office Address: (City)	, Floridà	p Code)
()		-
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar with and	Logger the obligations of the position	
тогору иссор: тв арроттот из гезізсегва адет. Тат juminar with ana	accept the obligations of the postitor	f.
	d (2001) (Cabanata = 1)	 -
Signature of New Registere	a Agent, ij changing	
Check if applicable		
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.	.	

6) ____ Change

____ Add

____ Remove

address of each Office (Attach additional shee Please note the officer/ P = President; V= Vic Executive Officer; CFC President, Treasurer, L Changes should be not a change, Mike Jones i Mike Jones, V as Remo	er and/or lets, if neces director til de Presiden D = Chief F Director wo ded in the fo leaves the c	ile by the first letter of the office title: it; T= Treasurer; S= Secretary; D= L Financial Officer. If an officer/director	Director; TR= Trustee; C = Cha holds more than one title, list th is listed as the PST and Mike Jo	Frman or Clerk; CEO - Chief first letter of each office held.
Example: XChange	PT	Iohn Doe		[]
X Remove	<u>v</u>	Mike Jones		
X Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	Address	
1) Change	A\$	Miguel Pena	11270 SW 5 S	MIAMI, FL 33174
Add XXX Remove 2) Change Add Remove Change Add Remove 4) Change Add Remove 5) Change Add Remove				26 W. SEEF FL

. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)	
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	15. 1
	AM 9:
	9: 05 E. F.
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If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate N/A)	
·	
	<u> </u>
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	<u></u> 1

05/06/2024	
The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(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, this document's effective date on the Department of State's records.	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 shareholder action was not required.	ction and shareholder
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment by the shareholders was/were sufficient for approval.	nt(s)
The amendment(s) was/were approved by the shareholders through voting groups. The following state must be separately provided for each voting group entitled to vote separately on the amendment(s):	ment /
"The number of votes cast for the amendment(s) was/were sufficient for approval	7.
by ¹⁰⁰	
(voting group)	SHOT TO
05/06/2024 Dated	AH 9: 05
Signature & Carlo	
(By a strector, president or other officer – if directors or officers have not bee selected, by an incorporator – if in the hands of a receiver, trustee, or other cappointed fiduciary by that fiduciary)	
Vladimir Perez	
(Typed or printed name of person signing)	
P	
(Title of person signing)	