P16000090183

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: VSP Construction Inc DOCUMENT NUMBER: P1600090183 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Vyacheslay Potekhin Name of Contact Person VSP Construction Inc Firm/ Company 1825 South Ocean Drive Apt 505 Address Hallandale Beach, FL 33009 City/ State and Zip Code alexeyrenaldo@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Vyacheslav Potekhin Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: □ \$35 Filing Fee □\$43.75 Filing Fee & □\$43.75 Filing Fee & □\$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed) **Mailing Address** Street Address Amendment Section Amendment Section

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

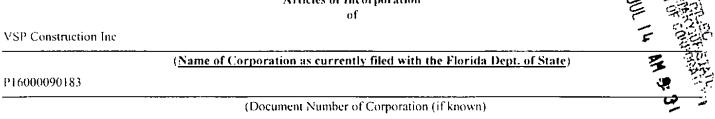
Clifton Building

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Articles of Amendment Articles of Incorporation



(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corporation:	
	The new
name must be distinguishable and contain the word "corporatio" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)	
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 add	trace in Florida anter the name of the
new registered agent and/or the new registered office address	
Name of New Registered Agent	
(Florida st	treet address)
New Registered Office Address:	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agen	t:
I hereby accept the appointment as registered agent. I am familiar	
er . ev	

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.

X Change	<u>PT</u>	John Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	Title		Name	Address
1) Change	VP		Stanislav Verlan	1850 S Ocean Dr Apt 2705
X Add				Hallandale Bch, FL 33009
Remove				
2) Change		_		
Add				
Remove				
3)Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change		_		
Add				
Remove				

	(Be specific)			
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o ao sinenoment brovides for an excl	in in	· · · ·	ment itself:	
provisions for implementing the ame	ndment if not conta	ainea in the amena		
provisions for implementing the ame (if not applicable, indicate N/A)	<u>ndment if not cont</u>	ained in the amend		
provisions for implementing the ame	ndment if not cont:	ained in the amend		
provisions for implementing the ame	ndment if not cont:	ained in the amend		1814 3
provisions for implementing the ame	ndment if not cont:	ained in the amend		
provisions for implementing the ame	ndment if not cont:	ained in the amend		
provisions for implementing the ame	ndment if not conta	ained in the amend		
provisions for implementing the ame	ndment if not cont:	aned in the amend		
If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A)	ndment if not cont:	aned in the amend		

The date of each amendment(s) add date this document was signed.	ption:	, if other than the
Effective date if applicable:		
	tno more than 90 days after amendment file date)	
Note: If the date inserted in this bloodocument's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this da artment of State's records.	te will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adop by the shareholders was/were suff	ted by the shareholders. The number of votes cast for the amendment(s icient for approval.	;)
	oved by the shareholders through voting groups. The following stateme ach voting group entitled to vote separately on the amendment(s):	ent
"The number of votes cast for	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
☐ The amendment(s) was/were adoptaction was not required.	ted by the board of directors without shareholder action and shareholde	r
☐ The amendment(s) was/were adoptaction was not required.	ted by the incorporators without shareholder action and shareholder	
7/10/2017		
Dated		
63		
Signature (By a dr	ector, president or other officer – if directors or officers have not been	
•	by an incorporator – if in the hands of a receiver, trustee, or other cour	l
appointe	d fiduciary by that fiduciary)	
\	yacheslav Potekhin	
_	(Typed or printed name of person signing)	
F	resident	
-	(Title of person signing)	