## P17000037140

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

NAME OF CORPOR	ATION: ELOR VENUTRE	CORP				
DOCUMENT NUMBER: P17000037140						
The enclosed Articles	of Amendment and fee are su	bmitted for filing.				
Please return all corres	pondence concerning this ma	tter to the following:				
	NETANEL LEVY					
		Name of Contact Person	1			
	N/A		•			
		F' / C.	<del></del>			
	10051 NE SORU ALIO GLUM	Firm/ Company				
	18851 NE 29TH AVÉ SUITI					
		Address				
	AVENTURA FL 33180					
•	<del></del>	City/ State and Zip Code	2			
NETA	ANELLEVY@HOTMAIL.CO	DM .				
	_	ed for future annual report	notification)			
For further information	concerning this matter, pleas	se call:				
NETANEL LEVY		at (	266-6630			
Name o	of Contact Person	Area Co	de & Daytime Telephone Number			
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:			
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fec & 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

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ELOR VENUTRE CORP			
( <u>N</u> :	ame of Corporation as currently	filed with the Florida Dept. of State	<u>è</u> )
P17000037140			
	(Document Number of C	Corporation (if known)	
Pursuant to the provisions of section its Articles of Incorporation:	607.1006, Florida Statutes, this F	loridu Profit Corporation adopts the	following amendment(s) to
A. If amending name, enter the ne	ew name of the corporation:		
ELOR VENTURE CORP			The new
name must be distinguishable and "Corp.," "Inc.," or Co.," or the d word "chartered," "professional as.	esignation "Corp," "Inc," or "Co	" "company," or "incorporated" oo". A professional corporation nam A."	r the abbreviation
B. Enter new principal office add (Principal office address <u>MUST BE</u>			
C. Enter new mailing address, if a (Mailing address MAY BE A PC			<del></del>
			<u>Αφ</u> -1
	nt and/or registered office address:	ss in Florida, enter the name of the	FIL APR 28
Name of New Registered As	zent		
	(Florida stree	t address)	TI ORIE
New Registered Office Addi		, Florida_	(Zip Code)
	ν,	му	(Zip Coae)
New Registered Agent's Signature I hereby accept the appointment as r		th and accept the obligations of the pe	osition.
<del></del>	Signature of New Reg	gistered 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>	Name	Address
1)Change			
Add			/
Remove			/
2) Change			_ /
Add			/
Remove			<u> </u>
3) Change			
Add			
Remove			
4) Change			_
Add			
Remove			
5) Change			_
Add			
Remove			
6)Change		<u>/</u>	
Add			
Remove			

E. If amending or adding ad (Attach additional sheets, if	necessary). (Be spec	ific)		
N/A	<u> </u>			
		/-		<del>-</del>
•				
	- <del></del>			
*				
	<del></del>			
		- <del></del>		
F. If an amendment provide	for an exchange, recl	assification, or cance	ellation of issued sha	res,
provisions for implement (if not applicable, ind	ing the amendment if icate N/A)	not contained in the	amendment itself:	
NIA				
			· · · · ·	
				<u> </u>

The date of each amendment(s) adoption:	, if other than the
Effective date <u>if applicable</u> : (no more than 90 days after amendment file de	nte)
Note: If the date inserted in this block does not meet the applicable statutory filing requirement document's effective date on the Department of State's records.	ents, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the a by the shareholders was/were sufficient for approval.	mendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The follow must be separately provided for each voting group entitled to vote separately on the amenda	
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and action was not required.	l shareholder
The amendment(s) was/were adopted by the incorporators without shareholder action and sha action was not required.	reholder
04/26/2017 Dated	
Signature Netanel Levy	
(By a director, president or other officer of directors or officers have selected, by an incorporator – if in the hands of a receiver, trustee, of appointed fiduciary by that fiduciary)	ve not been or other court
NETANEL LEVY	
(Typed or printed name of person signing)	
PRESIDENT	
(Title of person signing)	