P17000040170

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phon	e #)
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(Bu	usiness Entity Na	me)
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TO: Amendment Section Division of Corporations

TO: Amendment Sec Division of Corp				
	VSPEC IMPORTS	S CORP		18 OEC - 1 PH 4: 26
NAME OF CORPO	RATION: VSPEC IMPORTS			(C) 41
DOCUMENT NUM	BER: P17000040170			
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.		The state of the s
Please return all corre	espondence concerning this ma	tter to the following:		20
	STEPHANIE CECILIA COI	RTES		
		Name of Contact Person	1	
	VSPEC IMPORTS CORP			
		Firm/ Company		
	12415 NE 13TH AVENUE			
		Address		
	MIAMI, FL 33161			
		City/ State and Zip Cod	e e	
DEA	LER.FINANCESERVICES@	GMAILCOM		
		sed for future annual report	notification)	
		·		
For further information	on concerning this matter, plea	se cali:		
STEPHANIE CECILIA CORTES		305	343-9961	
Name	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:	
\$35 Filing Fee	□\$43.75 Filing Fcc & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Am Div P.C	illing Address tendment Section rision of Corporations D. Box 6327 lahassee, FL 32314	Amend Divisio Clifton	Address ment Section on of Corporations Building executive Center Circle	

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

VSPEC IMPORTS CORP

P17000040170



(Name of Corporation as currently filed with the Florida Dept. of State)

	(Document Number	of Corporation (if known)	20
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, thi	s Florida Profit Corporation adopts the following an	
A. If amending name, enter the new na	ime of the corporation:		
N/A	-	77.	he new
	ation "Corp," "Inc." or	on," "company," or "incorporated" or the abbr "Co". A professional corporation name must con	reviation
R Enter new principal office address	if annlicable:	N/A	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)			
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		N/A	
D. If amending the registered agent an	d/or registered office ad	dress in Florida, enter the name of the	
new registered agent and/or the new			
Name of New Registered Agent	STEPHANIE CECILIA	CORTES	
	224 NE 89TH ST	· · · · · ·	
	(Florida s	treet address)	
New Registered Office Address:	EL PORTAL	. Florida ³³¹³⁸	
		(City) (Zip Cod	le)
New Registered Agent's Signature, if c I hereby accept the appointment as regist		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	PT	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) X Change	P	Stephane Cecilia Corks	224 NE 89TH ST
Add		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	EL PORTAL ,FL 33138
Remove			
2) Change		*	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			<u> </u>
Add			
Remove			
5) Change			
Add			
Remove			
O (1)			
6) Change	·		
Add			
Remove			

	dditional sheets, if n			`		
N/A	•	<u>-</u>				
					<u>-</u>	
	<u>-</u>	" -			***	
						
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F. <u>If an am</u>	tendment provides f ons for implementin	or an exchange, ro	eclassification, or	r cancellation of i	ssued shares,	
	not applicable, indic		n not contained	in the amendmen	CHSCH.	
N/A						
				 ·		
		·				
						
			·	· • • • • • • • • • • • • • • • • • • •		

The date of each amendment(s) ac	loption:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this b document's effective date on the De	lock does not meet the applicable statutory filing requirements, this date wi partment of State's records.	Il not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
	pted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were add action was not required.	pted by the incorporators without shareholder action and shareholder	
11/27/2017 Dated		
Signature	Sua	
selecte	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 sed fiduciary by that fiduciary)	
	STEPHANIE CECILIA CORTES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	