## P1700043/33

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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificate	s of Status
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Special Instructions to	Filing Officer:	
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SECRETARY OF STATE
TALLAHASSEE FLORE



August 9, 2017

V.I.S TAX & IMMIGRATION CORP 1198 WEST 23 STREET HIALEAH, FL 33010

SUBJECT: SNL SERVICES INT CORP

Ref. Number: P17000043133

We have received your document for SNL SERVICES INT CORP and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

CANNOT USE BENEFIT FORM

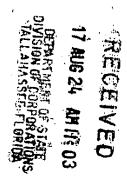
We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Shelia H Young Regulatory Specialist II

Letter Number: 017A00016291



## **COVER LETTER**

TO: Amendment Section Division of Corporations					
NAME OF CORPORATION: SNL Services Int Op-					
DOCUMENT NUMBER: P / 7000043133					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
Jose A Uneva					
Name of Contact Person  SNL Services Int Orp  Firm Company					
2(15 North 44 Aul					
Lhllywood H 33021					
Chy/ State and Zip Code					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
Lese A. Unara a1 (305) 863-7772					
Name of Contact Person Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount made payable to the Florida Department of State:					
S35 Filing Fee Certificate of Status Certified Copy (Additional copy is enclosed)  \$43.75 Filing Fee & Certificate of Status (Additional copy is enclosed)					
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building					

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327 Tallahassee, FL 32314

## **Articles of Amendment**

to

Articles of Incorporation

SNL Services Int Oup.
(Name of Corporation as currently filed with the Florida Dept. of State)
A 17000043133
(Document Number of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit Corporation</i> adopts the following amendment(s) to its Articles of Incorporation:
A. If amending name, enter the new name of the corporation:
NIA
name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)  Holly wood, H. 33021
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  Wollywood, H. 33001.
D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:  Name of New Registered Agent  DIS North 44 Au
New Registered Office Address: (Florida street address)  (City)  (Florida street address)  Florida (Zip Code)
New Registered Agent's Signature, if changing Registered Agent:  I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.
Lise D. Urona
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 Doc	
X Remove	V Mike Jones	,
X Add	SV Sally Smith	
Type of Action (Check One)  1) Change	Maria F. Quetiernez	Address  300 NW 191SC  Mianis FL 33/69
Add Remove  2) Change Add	De A. Chrona	2115 North 44 Are Wolfywood, H 3302
7 Remove 3) Change Add	VD Jose A. Uhana	2115 North 44 Ave Hollywood, H 3303
## Remove  4) Change Add Remove		
5) Change Add Remove	<del></del>	
6) Change Add Remove		

<ul> <li>If amending or a (Attach additional)</li> </ul>	adding additional A I sheets, if necessar	Articles, enter chan v). (Be specific)	ige(s) here:			
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If an amendmer	it provides for an (	exchange, reclassifi	cation, or cancel	lation of issued sh	ares.	
provisions for	implementing the a	amendment if not c	ontained in the a	mendment itself:		
(if not appl	icable, indicate N/A	1)				
NIA						
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The date of each amendment(s) adoption:	1/50	12017	, if other than the
date this document was signed.  Effective date if applicable:	07/1/	) (A)	
	(no more than 90	days after amendment fi	le date)
Note: If the date inserted in this block does document's effective date on the Department of		ble statutory filing requi	rements, this date will not be listed as the
^	HECK ONE)		
The amendment(s) was/were adopted by the by the shareholders was/were sufficient for	e shareholders. The napproval.	number of votes cast for	the amendment(s)
☐ The amendment(s) was/were approved by t must be separately provided for each voting			
"The number of votes cast for the am-	endment(s) was/were	sufficient for approval	
by		, ,	
(V	oting group)		•
☐ The amendment(s) was/were adopted by th action was not required.	e board of directors w	rithout shareholder actio	n and shareholder
☐ The amendment(s) was/were adopted by th action was not required.	e incorporators witho	ut shareholder action and	d shareholder
Dated	11/2017	<u> </u>	
Signature	A. Ule	(عد	
		r – if directors or officer hands of a receiver, trust	
	ry by that fiduciary)		se, or other court
	Jose	A. Uner	ia
	(Typed or printed na	ime of person signing)	
	U.P.		
	(Title of	person signing)	