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AUG 17 2017 I ALBRITTON

COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPORATION: <u>Carmelia Enterprises, Inc</u>
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Name of Contact Person Carmelia Enterprises Firm/ Company 1830 NE 23rd Street Address Cape Gral, Florida 33909 City/ State and Zip Code WR Carmelia @ gmail.com E-mail address: (to be used for funder annual report notification)
For further information concerning this matter, please call:
William Ca(melia at (239) 671 - 2209 Name of Contact Person Area Code & Daytine Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
\$35 Filing Fee
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

ot
Carmelia Enterprises, Inc
(Name of Corporation as currently filed with the Florida Dept. of State)
P170000 65813
(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:
Valence Property Services, Inc. The new
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)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) N/A
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 Name of New Registered Agent
, (Florida street address)
A I / I
New Registered Office Address: // A
(chi) (ch conc)
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. NA Signature of New Registered Agent, if changing
/ 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> <u>Joh</u>	n Doe			
X Remove	<u>V</u> <u>Mi</u>	<u>ke Jones</u>			
X Add	<u>SV</u> <u>Sal</u>	l <u>y Smith</u>			
Type of Action (Check One)	<u>Title</u>	Name		<u>Addres</u> s	
1) Change				<u> </u>	_
Add Remove	N/A				
2) Change					
Add	NJA				
Remove 3) Change					_
Add Remove	N/A				
4) Change					_
Add	N/A				_
5) Change	<u></u>			··-	
Add Remove	NA				_
6) Change					
Add					
Remove					

Attach addition	radding additional A al speets, if necessary	rticles, enter change(v). (Be specific)	<u> </u>		
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If an amendme	ent provides for an e	xchange, reclassificati	on, or cancellation of	issued shares,	
provisions for	implementing the audicate N/A)	mendment if not cont:	ained in the amendme	nt itself:	
. 1	ficame, indicate with				
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	·				
					

The date of each amendment(s) adoption: M	, if other than the
Effective date if applicable: 8/9/17 (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 date wildocument's effective date on the Department of State's records.	l 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 amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):	
"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 shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
Dated 8/9/2017	
Signature (By a director, president or other officer – if directors or officers have not been	
selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
(Typed or printed name of person signing)	
President	
(Title of person signing)	