## P17000090498

(Req	u <b>e</b> stor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to F	iling Officer:	
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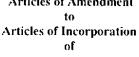


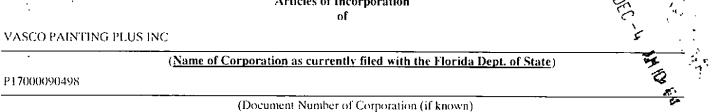
## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: VASC	CO PAINTING PLUS INC
DOCUMENT NUMBER: P17000090	
The enclosed Articles of Amendment a	nd fee are submitted for filing.
Please return all correspondence concer	rning this matter to the following:
MARIA BEJER	ANO
	Name of Contact Person
VASCO PAINT	ING PLUS INC
	Firm/ Company
8600 SW 124 ST	Γ
	Address
MIAMI, FL 331	56
	City/ State and Zip Code
alberto@taxcareplus.co	om
E-mail addr	ess: (to be used for future annual report notification)
For further information concerning this	matter, please call:
MARIA BEJERANO	at ( 786 ) 416-3351
Name of Contact Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following ar	nount made payable to the Florida Department of State:
■ \$35 Filing Fee □\$43.75 File Certificate	
Mailing Address Amendment Section Division of Corporati P.O. Box 6327 Tallahassee, FL 3231	Clifton Building

## Articles of Amendment to οf





ent(s) to

Pursuant to the provisions of section 607,1006, Florida its Articles of Incorporation:	Statutes, this <i>Flo</i>	rida Profit Corpore	ation adopts the fo	ollowing amendm
A. If amending name, enter the new name of the cor	poration:			
name must be distinguishable and contain the word "Corp.," "Inc.," or Co.," or the designation "Corp.," word "chartered," "professional association," or the a	" "Inc," or "Co"	". A professional c	incorporated" or corporation name	The new the abbreviation must contain the
B. Enter new principal office address, if applicable:				
(Principal office address <u>MUST BE A STREET ADDI</u>	RESS )			
	-		<del>-</del> -	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	- - -			
D. If amending the registered agent and/or registere new registered agent and/or the new registered o	d office address ffice address:	in Florida, enter t	he name of the	
Name of New Registered Agent	<u></u>			<u>.</u>
	(Florida street e	address)		<del></del>
New Registered Office Address:	(Cit		, Florida	(Zip Code)
	(CII)	27		taip codes
New Registered Agent's Signature, if changing Regis	stered Agent:			

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

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 Doe	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
<u>X</u> Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	<u>Addres</u> s
1) Change	<u>v</u>	ROBERTO MANUEL BRUNELY	8600 SW 124 ST
XAdd			
Remove			MIAMI, FL 33156
2) Change	S	YURI MONTES RODRIGUEZ	8600 SW 124 ST
X Add			<del></del> -
Remove			MIAMI, FL 33156
3 ) Change	-		
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
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6) Change			
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<u></u>				
an amendment provides for an exch	ange, reclassificati	on, or cancellation	of issued shares,	
orovisions for implementing the amer (if not applicable, indicate N/A)	ndment if not conta	ined in the amend	lment itself:	
	_			-
			-	·

	11/29/2017	
The date of each amendmen date this document was signed		, if other than the
•	11/29/2017	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date the Department of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
	ere adopted by the shareholders. The number of votes cast for the amendment(s) were sufficient for approval.	
	ere approved by the shareholders through voting groups. The following statement and for each voting group entitled to vote separately on the amendment(s):	t
"The number of vote	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/we action was not required.	re adopted by the board of directors without shareholder action and shareholder	
■ The amendment(s) was/we action was not required.	re adopted by the incorporators without shareholder action and shareholder	
11/29 Dated	0/2017	
	MBilaeren	
Signature	By a director, president or other officer – if directors or officers have not been	
s	elected, by an incorporator – if in the hands of a receiver, trustee, or other court ppointed fiduciary by that fiduciary)	
	MARIA BEJERANO	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	