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R. WHITE SEP 17 2018 PILED 2010 SEPTT PHIZ: 5 SECRETARY OF STATE

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: SANI'S SERVICE	E CORP	
DOCUMENT NUME	P17000001101		
The enclosed Articles	of Amendment and fee are su	abmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	CLAYTON S DA SILVA		
		Name of Contact Person	3
	C/O SVENTURINI BUSINI	ESS SERVICES	
		Firm/ Company	
	440 E SAMPLE RD SUITE	E 204 A	
	-	Address	
	POMPANO BEACH, FL 3	3064	
		City/ State and Zip Cod	e
SUZ/	ANA@SVENTURINI.COM		
	_	sed for future annual report	notification)
			,
For further information	n concerning this matter, pleas	se call:	
SUZANA VENTURINI		954	3665353
Name of Contact Person		Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	artment of State:
☐ \$35 Filing Fee	☐S43.75 Filing Fee & 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)
And Divi P.O.	ling Address endment Section ision of Corporations Box 6327 ahassee, FL 32314	Amend Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment

Articles of Incorporation of

FILED

SANI'S SERVICE CORP

2018 SEP 1 1 PM 12: 51

SANIS SERVICE CORP	- OTATE
(Name of Corporation as current	TALL AHASSEE, L
P1700009901	
(Document Number of	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
FAST PRIME CORP	The new
name must be distinguishable and contain the word "corporation". "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	on," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable:	4377 SW 10 TH PL APT 102
(Principal office address <u>MUST BE A STREET ADDRESS</u>)	DEERFIELD BEACH -FL 33442
C. Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
D. If amending the registered agent and/or registered office add	lrass in Florida, ontor the name of the
new registered agent and/or the new registered office addres	
Name of New Registered Agent	
(Florida st	treet address)
New Registered Office Address:	PL 1.
New Registered Office Address.	, Florida
	•
New Registered Agent's Signature, if changing Registered Agen	
I hereby accept the appointment as registered agent. I am familiar	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.

X Change	<u>PT</u>	John Doc	
X Remove	\underline{V}	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	VP	SANI CRISTINA DOS SANTOS	4377 SW 10 TH PL APT102
X Add			DEERFIELD BEACH,FL 33442
Remove			
2) Change		<u> </u>	
Add			
Remove			
3) Change			· -
Add			
Remove			
4) Change			
Add			
Remove			
5) Change		_	
Add			
Remove			
6) Change			
Add			
Remove			

If amending or adding additional Arti Attach additional sheets, if necessary).	(Be specific)
·····	
	·
	
f an amendment provides for an exch	hange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	endment if not contained in the amendment itself:
(y noi applicable, maictae w.x.)	
	

date this document was signed.	option:, if other than
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 bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date will not be listed as partment of State's records.
Adoption of Amendment(s)	(CHECK ONE)
☐ The amendment(s) was/were ado by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.
	roved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):
"The number of votes cast t	or the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were ado action was not required.	pted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators without shareholder action and shareholder
08/27/ 2 018 Dated	· · · · · · · · · · · · · · · · · · ·
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Jighatare	16/10 40 · 10/1/2
	rector, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other court
_	ed fiduciary by that fiduciary)
	CLAYTON S DA SILVA
-	(Typed or printed name of person signing)
	\circ
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