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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF C	CORPOR	RATION: VICTOR'S PUMP	SERVICES INC			
DOCUMEN	T NUME	BER: P180000046				
		of Amendment and fee are su	ibmitted for filing.			
Please return	all corres	pondence concerning this ma	itter to the following:			
	JOSE A SANCHEZ					
Name of Contact Person						
		VICTOR'S PUMP SERVICE	ES INC			
	•		Firm/ Company			
		3713 41 STREET SW				
	-		Address	<u> </u>		
	_	LEHIGH ACRES FL 33976				
			City/ State and Zip Cod	v -		
	CHAP	ULINA_1605G@HOTMAII	L.COM			
		E-mail address: (to be us	sed for future annual report	notification)		
For further in	formation	concerning this matter, pleas	se call:			
JOSE A SAN	ICHEZ		at (<u></u>	826-4070		
	Name o	f Contact Person		de & Daytime Telephone Number		
Enclosed is a	check for	the following amount made p	payable to the Florida Depa	ortment of State;		
S35 Filing	g Fee	☐\$43.75 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)		
	Amer Divis P.O., J	ng Address Adment Section ion of Corporations 30x, 6327 nassee, FL 32314	Amend Divisio Clifton 2661 E.	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301		

Articles of Amendment to Articles of Incorporation of

VI	ľŒ	$\Gamma(1)$	R'S	PI	IN	1P	SER	VV	CES	INC

(Name of Corporation as curr	ently filed with the Florid	la Dept, of State)
2180000046		
(Document Numb	er of Corporation (if knows	1)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this <i>Florida Profit Corpord</i>	ation adopts the following amendment(
x. If amending name, enter the new name of the corporation	<u>ı:</u>	
WA		The new
ame must be distinguishable and contain the word "corpor Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or ord "chartered," "professional association," or the abbreviati	or "Co". A projessional c	incorporated" or the abbreviation
B. Enter new principal office address, if applicable:	N/A	
Principal office address MUST BE A STREET ADDRESS	_	
		<u>≽</u> ≗ 0
. Enter new mailing address, if applicable:	N/A	
(Mailing address <u>MAY BE A POST OFFICE BOX</u>)		<u> </u>
		₹ . 6
		
 If amending the registered agent and/or registered office and new registered agent and/or the new registered office add 		he name of the
	1 (33.	
Name of New Registered Agent		
(Florid	a street address)	
New Registered Office Address:		, Florida
	(Ciṇ)	(Zip Code)
		•
ew Registered Agent's Signature, if changing Registered Ag	gent:	
hereby accept the appointment as registered agent. I am famil		igations of the position.
·:		
•		
20. 221	ew Registered Agent, if char	

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	<u>PT</u>	John Doe	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	VP	FRANCISCO SANCHEZ RAMOS	3713 41 STREET SW
X Add			LEHIGH ACRES FL 33976
Remove			
2) Change	VP	MARIA C SANCHEZ	3713 41 STREET SW
Add			LEHIGH ACRES, FL 33976
V Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Removeus			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
<u>-</u>	
<u></u>	
	change, reclassification, or cancellation of issued shares,
(if not applicable, indicate N/A)	nendment if not contained in the amendment itself:
(g not applicable, maleure 7477)	
1	

	05/01/2019	
The date of each amendment(s) a date this document was signed.	idoption:	, if other than th
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the E	block does not meet the applicable statutory filing requirements, this date of epartment of State's records.	will not be listed as th
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
■ The amendment(s) was/were ac by the shareholders was/were s	dopted by the shareholders. The number of votes cast for the amendment(s) sufficient for approval.	
	oproved by the shareholders through voting groups. The following statement is each voting group entitled to vote separately on the amendment(s):	
"The number of votes cas	it for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/were action was not required.	lopted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were action was not required.	lopted by the incorporators without shareholder action and shareholder	
Dated	75/01/19/	
Signature		
	director, president or other officer – if directors or officers have not been	
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court	
арроі	nted fiduciary by that fiduciary)	
	President	
	(Typed or printed name of person signing)	 .
	PRESIDENT	
	(Title of person signing)	