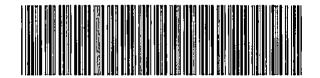
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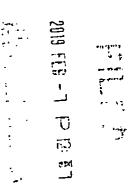
(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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FEB 1 * 200 T. LEMEUX

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORA	TION: VIRTUAL CRY	PTO CORP	
DOCUMENT NUMBE	R:		
The enclosed Articles of	Amendment and fee are su	bmitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
J/	AIME GOMEZ		
_		Name of Contact Person	1
		Firm/ Company	
80	004 NW 154TH STREET		
		Address	
<u>M</u>	IAMI LAKES, FL 33016		
		City/ State and Zip Code	
TIMOT	HY.BENJAMIN@BELLSO	OUTH.NET	
	E-mail address: (to be us	sed for future annual report	notification)
For further information c	oncerning this matter, pleas	se call:	
TIMOTHY BENJAMIN		at (<u>305</u>	206-0088
Name of Contact Person Area Code & Daytime Telephone Nu			
Enclosed is a check for the	he following amount made	payable to the Florida Depa	rtment of State:
S35 Filing 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)
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Amend Divisio Clifton	Address ment Section n of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

VIRTUAL CRYPTO CORP

<u>-</u>		1	٠.	į.	
?	1	*			

The new company," or "incorporated" or the abbreviation A professional corporation name must contain the
The new company," or "incorporated" or the abbreviation
company," or "incorporated" or the abbreviation
company," or "incorporated" or the abbreviation
company," or "incorporated" or the abbreviation
1
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1
Florida, enter the name of the
ress) N/A
, Florida N/A (Zip Code)
(zip Coat)

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, a
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:

 $P = \dot{P}resident; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Ch. Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each officeld, President, Treasurer, Director would be PTD.$

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 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 Chang-Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Doe			`		
X Remove	Y	Mike Jone	<u>es</u>	$M \rightarrow M \rightarrow$	7		
X Add	<u>sv</u>	Sally Smi	<u>.th</u>		`		
Type of Action (Check One)	<u>Title</u>	j	<u>Name</u>	·		<u>Addres</u> s	
1) Change							
Add							
Remove							
2) Change							
Add							
Remove							
3) Change							
Add							
Remove							
4) Change							
Add					-		
Remove							
5) Change							
Add							
Remove							· · · · · · · · · · · · · · · · · · ·
Kennove						-	
6) Change							
Add							
Remove							

14	(Be specific)
/A .	
	
	
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If an amendment provides for an eyeb	range reclassification or cancellation of issued chares
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, and nament if not contained in the amendment itself:
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	
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provisions for implementing the ame	
provisions for implementing the ame (if not applicable, indicate N/A)	
provisions for implementing the ame (if not applicable, indicate N/A)	

The date of each amendment date this document was signed.		, if other than
Ţ.	N/A	
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 he Department of State's records.	date will not be listed as
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/wer by the shareholders was/we	re adopted by the shareholders. The number of votes east for the amendme ere sufficient for approval.	nt(s)
	re approved by the shareholders through voting groups. The following state of for each voting group entitled to vote separately on the amendment(s):	ement
"The number of votes	cast for the amendment(s) was/were sufficient for approval	
hy	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	(voting group)	
The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareho	older
☐ The amendment(s) was/wer action was not required.	re adopted by the incorporators without shareholder action and shareholder	
FEBF Dated	RUARY 6, 2019	
Signature		
(B	by a director, president or other officer – if directors or officers have not be elected, by an incorporator – if in the hands of a receiver, trustee, or other expointed fiduciary by that fiduciary)	
	TIMOTHY BENJAMIN	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	