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COVER LETTER

TO: Amendment Section Division of Corporations			
NAME OF CORPORATION: Vanni E	Herprises, Corp.		
DOCUMENT NUMBER: P180000	9281		
The enclosed Articles of Amendment and fee are submitted	for filing.		
Please return all correspondence concerning this matter to the	e following:		
<u>Antonio</u>	Fuertes e of Contact Person		
Vanni En	HCD1SCS Firm/Company		
2860 N.	Macdill Are Ste B		
Tampa	State and Zip Code		
Vannienteronse E-mail address: (to be used for f	sahotmail com uture annual report notification)		
For further information concerning this matter, please call:			
Antonio Frestes Name of Contact Person	at (813) 863-0950 Area Code & Daytime Telephone Number		
Enclosed is a check for the following amount made payable	to the Florida Department of State:		
Certificate of Status Cer (Ad	.75 Filing Fee & \$\sum \\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$		
Mailing Address Amendment Section	Street Address Amendment Section		
Division of Corporations	Division of Corporations		
P.O. Box 6327	Clifton Building		
Tallahassee, FL 32314	2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to
Articles of Incorporation of

Vanni Enterprise	s Corp
(Name of Corporation as	currently filed with the Florida Dept. of State)
P 18 0000 9 38	number of Corporation (if known)
	ites, this Florida Profit Corporation adopts the following amendment(s)
A. If amending name, enter the new name of the corpora	 ation:
	The new
name must be distinguishable and contain the word "co "Corp.," "Inc.," or Co.," or the designation "Corp," "In word "chartered," "professional association," or the abbre	rporation," "company," or "incorporated" or the abbreviation c," or "Co". A professional corporation name must contain the
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES.	
(Frincipal office address MOST BE A STREET ADDRESS	<u> </u>
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	
	<u> </u>
D. If amending the registered agent and/or registered of	
new registered agent and/or the new registered office	adoress:
Name of New Registered Agent	
(F	lorida street address)
New Registered Office Address:	. Florida (City) (Zip Code)
	(Zip Code)
New Registered Agent's Signature, if changing Registere I hereby accept the appointment as registered agent. I am J	
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.

Mike Jones, V as Rem	ove, and Sally Smil	th, SV as an Add.		
Example: X Change	PT John	<u>Doe</u>		
X Remove	<u>V</u> <u>Mike</u>	<u>Jones</u>		
X Add	<u>SV</u> <u>Sally</u>	Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>		Address
1) Change	<u>P</u> _	Antonio	> Fuertes	2800 N MacdillAre
Add Remove				Tampa, F2 35607
2) Change Add	₽	Shain	a Fuertes	2700 N. Madill Are Ste B
Remove 3) Change Add	Mgc.	Anton	10 Fue Aes	Tampa, FL 33LEOT 2300 N. Madill Ave
Remove				Tampa, FI 33607
4) Change Add Remove				
5) Change Add				
Remove				
6) Change Add				
Remove				

E. If amending or adding additional Articles, enter chan	ge(s) nere:
(Attach additional sheets, if necessary). (Be specific)	
	
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F. If an amendment provides for an exchange, reclassific	tation or cancallation of issued charac
provisions for implementing the amendment if not co	ontained in the amendment itself:
(if not applicable, indicate N/A)	
	
	<u> </u>

The date of each amendment(s) adoption:	May	ST	,2019	, if o	ther than the
date this document was signed.	" .	1			
Effective date if applicable:	7702	21	3 019.		<u> </u>
	(no more f nan	90 days a	sfter amendment	ile date)	
Note: If the date inserted in this block does r document's effective date on the Department of		licable sta	tutory filing requ	airements, this date will not be	listed as the
Adoption of Amendment(s) (CI	IECK ONE				
☐ The amendment(s) was/were adopted by the by the shareholders was/were sufficient for a		he numbe	r of votes cast for	the amendment(s)	
☐ The amendment(s) was/were approved by the must be separately provided for each voting					
"The number of votes cast for the ame	ndment(s) was/w	ere suffic	ent for approval		
by				••	
(vo	ting group)				
☐ The amendment(s) was/were adopted by the action was not required. ☐ The amendment(s) was/were adopted by the					
action was not required.	lineorporato.b wi	tilout silui	enorder wettern wi	is one enough	
Dated5/\/	2019				
Signature(By a director, pres	ident or other of	icer – if o	lirectors or office	rs have not been	
selected, by an inco	Srporator – if in t	he hands			
appointed fiduciary	y by that fiduçian	y)			
	Anton	io F	vertes		
	(Typed or printed	d name of	person signing)		. —
	Piles	iden	+		
	(Title	e of perso	n signing)		