P1800012089

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MAR 0 6 2018 T. LEANEUX



COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: SALAZAR	SERVICES VALET PARKING CORP					
DOCUMENT NUMBER: P18000012089						
The enclosed Articles of Amendment and fe	e are submitted for filing.					
Please return all correspondence concerning	this matter to the following:					
JOHAN JOSE SALA	ZAR SILVA					
	Name of Contact Person					
SALAZAR SERVICI	S VALET PARKING CORP					
	Firm/ Company					
11015 SW 88TH ST 2	11015 SW 88TH ST APT H203					
	Address					
MIAMI, FL 33176						
	City/ State and Zip Code					
OLIMPYC@MSN.COM						
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter	er, please call:					
JOHAN JOSE SALAZAR SILVA	at () 902-8587					
Name of Contact Person	Area Code & Daytime Telephone Number					
Enclosed is a check for the following amount	made payable to the Florida Department of State:					
\$35 Filing Fee \$\sum \\$43.75 Filing Fee Certificate of S						
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle					

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED

SALAZAR SERVICES VALETTARRING C	·		2018 HAR -5 P # 35
(<u>Name of Cor</u>	rporation as currentl	y filed with the Florida D	
P18000012089		· · · · · · · · · · · · · · · · · · ·	SECRETARY OF STATE
	(Document Number of	f Corporation (if known) 17	ALLAHASSEE: FLORIDA
Pursuant to the provisions of section 607.1006, ts Articles of Incorporation:	Florida Statutes, this	Florida Profit Corporation	adopts the following amendment
4. If amending name, enter the new name o	f the corporation:		
N/A			The new
name must be distinguishable and contain t "Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"	"Corp," "Inc," or "	Co". A professional corp	rporated" or the abbreviation
B. Enter new principal office address, if app	rlicable:	N/A	
Principal office address MUST BE A STREE			
		•	
			W.N.
C. Enter new mailing address, if applicable	::	21/4	
(Mailing address MAY BE A POST OFFICE BOX)		N/A	
D. If amending the registered agent and/or			name of the
new registered agent and/or the new regi		<u>i</u>	
Name of New Registered Agent N/A			
	(Florida str	eet address)	
New Registered Office Address:			, Florida
		(City)	(Zip Code)
Nort Designation of American Commencer of the con-	D		
New Registered Agent's Signature, if changi hereby accept the appointment as registered a	ing Registered Agent agent. – Lam familiar v	<u>:</u> with and accept the obligat	ions of the position.
	<u>.</u>	,	
	1	^	
	MI	7	
	Signature of New R	egistered Agent, if changir	ıg

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 Do	<u>oe</u>	
X Remove	<u>V</u>	Mike Jo	<u>ones</u>	
X Add	<u>sv</u>	Sally Si	mith_	
Type of Action (Check One)	<u>Title</u>		Name	<u>Addres</u> s
1) X Change	P		JOHAN JOSE SALAZAR SILVA	11015 SW 88TH ST APT H203
Add				MIAMI, FL 33176
Remove				
2) Change				
Add				
Remove				
3) Change		_		
Add				
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change		_		
Add				
Remove				

E. If amending or adding additional Artic (Attach additional sheets, if necessary).	les, enter change(s) here (Be specific)	<u>:</u>	
N/A			
			### AA .
			
	-		
F. If an amendment provides for an excha	ange, reclassification, or	cancellation of issued sl	iares.
provisions for implementing the amen	dment if not contained i	n the amendment itself:	
(if not applicable, indicate N/A) N/A			
IVA			

The date of each amendmen	t(s) adoption:	, if other than the
date this document was signed	02/27/18	
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 dathe Department of State's records.	ate will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
	ere adopted by the shareholders. The number of votes cast for the amendment(vere sufficient for approval.	s)
	ere approved by the shareholders through voting groups. The following statem and for each voting group entitled to vote separately on the amendment(s):	ent
	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	ere adopted by the board of directors without shareholder action and shareholder	er
The amendment(s) was/we action was not required.	ere adopted by the incorporators without shareholder action and shareholder	
02/27 Dated Signature		
(I s	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other couppointed fiduciary by that fiduciary)	
	JOHAN JOSE SALAZAR SILVA	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	············