# P1500053638

(F	Requestor's Name)
(/	Address)
(/	Address)
(6	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(1	Business Entity Name)
(i	Document Number)
Copies	Certificates of Status
enstructions to F	Filing Officer:
	J. HORNE APR - 3 2023

Office Use Only



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2021/JR 31 /JJ 5:27 SECTION 1: 121 5:27



## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

PURONVET CO	ORP		
Please Debit I200	000000257 For:	35	
Thank you Seth 1	Neelev		
1-1-1-	<u> </u>		
Stoff			Art of Inc. File
			LTD Partnership File
			Foreign Corp. File
			L.C. File
			Ficutious Name File
			Trade/Service Mark
			Merger File
			Art, of Amend. File
			RA Resignation
			Dissolution / Withdrawal
			Annual Report / Reinstatement
			Сеп. Сору
			Photo Copy
			Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
,			Officer Search
1			Fictitious Search
	<del></del>		Fictitious Owner Search
Signature			Vehicle Search
	. <b></b>		Driving Record
Requested by:			UCC 1 or 3 File
			UCC 11 Search
Name	Date	Time	UCC 11 Retrieval
Walk-In		Up	Courier

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

NAME OF CORPOR	RATION: PURONVET COR	P	
DOCUMENT NUME			
	of Amendment and fee are su	bmitted for filing.	
Please return all corres	spondence concerning this ma	tter to the following:	
	Jonathan Steszewski, Esq.		
		Name of Contact Person	1
	Steszewski Law		
		Firm/ Company	
	15100 NW 67th Ave. Suite 2	00	
		Address	
	Miami Lakes, FL 33014		
		City/ State and Zip Code	2
	ionostron Gotoon matritum com		
	jonathan@steszewskilaw.com	sed for future annual report	
For further information	n concerning this matter, pleas		<b>√</b> 631-2438
Name o	of Contact Person	at ( Ar <b>ea</b> Co	) 631-2438 de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made		
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 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		Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

### Articles of Amendment to Articles of Incorporation of

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# (Name of Corporation as currently filed with the Florida Dept. of State) P18000053638 (Document Number of Corporation (if known) Pursuant to the provisions of section 607.1006, Florida Statutes, this Florida Profit Corporation adopts the following amendment(s) to its Articles of Incorporation: A. If amending name, enter the new name of the corporation: name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A." B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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 address in Florida, enter the name of the new registered agent and/or the new registered office address: Name of New Registered Agent (Florida street address) New Registered Office Address: (City) (Zip Code) New Registered Agent's Signature, if changing Registered Agent:

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

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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)

Example:

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 Do	<u>c</u>	
X Remove	<u>v</u>	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	nith	
Type of Action (Check One)	Title		Name	Address
1) Change	VP	_	Maylin Soca Perez	13755 SW 176th Terrace
X Add				Miami, FL 33177
Remove				
2) Change		_		···
Add				
Remove Change		_		***************************************
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				
Remove				
6) Change				
Add	<u></u>	<del></del>		
Remove				

	iding additional Art sheets, if necessary).	(Be specific)			
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an amendment	nplementing the am	endment if not con	ntained in the ame	ndment itself:	<u></u>
rovisions for in	able, indicate N/A)				
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The date of each amendment(s) a	doption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this be document's effective date on the Do	lock does not meet the applicable statutory filing requirements, this partment of State's records.	s date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	opted by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were st	opted by the shareholders. The number of votes cast for the amendm officient for approval.	ent(s)
	proved by the shareholders through voting groups. The following state each voting group entitled to vote separately on the amendment(s):	tement
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
»ytle cte	iscent president or other officer – if directors or officers have not be defined an incorporator – if in the hands of a receiver, trustee, or other	
appoin	led fiduciary by that fiduciary)	
	Carlos Alberto Puron Guzmeli	
	(Typed or printed name of person signing)	
	P	
	(Title of person signing)	<del></del>

## **COVER LETTER**

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: PURONVET COR	RP	
DOCUMENT NUM	P18000053638		
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.	
Please return all corre	spondence concerning this ma	atter to the following:	
	Jonathan Steszewski, Esq.		
		Name of Contact Person	า
	Steszewski Law		
		Firm/ Company	
	15100 NW 67th Ave. Suite 2	00	
		Address	
	Miami Lakes, FL 33014		
		City/ State and Zip Cod	е
	jonathan@steszewskilaw.com	n	
	E-mail address: (to be us	sed for future annual report	notification)
For further informatio	n concerning this matter, plea		631-2438
Name	of Contact Person	at ( Area Co	de & Daytime Telephone Number
Enclosed is a check fo	r the following amount made		
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 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 The Co	Address  ment Section  n of Corporations entre of Tallahassee  J. Monroe Street, Suite 810

Tallahassee, FL 32303