P1900000 3923

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2020 SEC 1.5 PH 2: 44

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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: VERSSATTI MII	LWORK, CORP		
	BER: P19000003923			
	of Amendment and fee are su	ibmitted for filing.		
Please return all corre	espondence concerning this ma	atter to the following:		
	FERNANDO SILVA			
		Name of Contact Person	n	
	SKYTRUST ENTERPRISE	. LLC		
		Firm/ Company		
	123 NW 13TH ST #304-7			
		Address		
	BOCA RATON, FL 33432			
		City/ State and Zip Cod	e	
	FERNANDO@SKYTRUST	ENTERPRISE.COM		
	-	sed for future annual report	notification)	
For further information	on concerning this matter, plea		463-2557	
Name	of Contact Person	at (at Co	de & Daytime Telephone Number	
Enclosed is a check fo	or the following amount made			
S35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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

The state of the s

VERSSATTI MILLWORK, CORP.

VERSSATTI WILLWORK, CORP			
	ntly filed with the Florida Dept. of State)		
P19000003923			
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006. Florida Statutes, thits Articles of Incorporation:	is Florida Profit Corporation adopts the following amendment(
A. If amending name, enter the new name of the corporation:			
ame must be distinguishable and contain the word "corporation,"	The new		
Inc.," or Co.," or the designation "Corp," "Inc," or "Co", chartered," "professional association," or the abbreviation "P.A	I professional corneration name and the state of		
Enter new principal office address, if applicable:	6325 ALL AMERICAN BLVD		
Principal office address MUST BE A STREET ADDRESS)	ORLANDO, FL 32810		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)	6325 ALL AMERICAN BLVD		
	ORLANDO, FL 32810		
. If amending the registered agent and/or registered office add	dress in Florida, enter the name of the		
new registered agent and/or the new registered office address	is:		
Name of New Registered Agent			
(Florida si	treet address)		
New Registered Office Address:	Florida		
	(City) (Zip Code)		
ew Registered Agent's Signature, if changing Registered Agen	<u>t:</u>		
nereby accept the appointment as registered agent. I am familiar	with and accept the obligations of the position.		
Clamater CM			
Signature of New F	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)

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 = ChiefExecutive 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,

<u>X</u> 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>	<u>Addres</u> s		
1) Change	VP	ALEX D. COELHO	6325 ALL AMERICAN BLVD		
$\frac{X}{Add}$			ORLANDO, FL 32810		
Remove					
2) Change		<u> </u>			
Add					
Remove Change					
Add					
Remove					
4) Change					
Add					
Remove					
51 Change					
Add					
Remove					
6) Change					
Add					
Remove					

	ng or adding addi litional sheets, if no	ecessary).	(Be specific)				
							
						<u> </u>	
							
			<u>-</u>			_	
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	<u>-</u>						
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an amendr	ment provides for or implementing t	an exchange	reclassificati				
<u>rovisions f</u>	or implementing to oplicable, indicate	the amendm	ent if not cont	on, or cancer	<u>lation of issu</u>	<u>ed shares,</u>	
(if not ap	pplicable, indicate	NZ4)		amed in the a	menament ii	<u>self:</u>	
							
		 -					
		<u> </u>					

The date of each amendment(s) adoption:
Effective date if applicable:
(no more than 90 days after amendment file date)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
Adoption of Amendment(s) (CHECK ONE)
■ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.
The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for approval
by
(voting group)
09/10/2020 Dated
Signature Loanado Xaurian Coolha (By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary) (Typed or printed name of person signing)
(Title of person signing)