P190000 18118

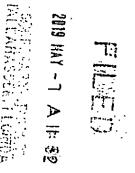
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TO: Amendment Section Division of Corporations

NAME OF CORPORATION:	VICTORIA'S	CUSTOM WOR	RK COR	P
DOCUMENT NUMBER:	P1900018118			
The enclosed Articles of Amenda	ment and fee are su	bmitted for filing.		
Please return all correspondence	concerning this ma	tter to the following	ng:	
JUAN	C TORRES PA	RPASEN		
		Name of Cont	act Persor	
		Firm/ Cor	npany	
4901 8	SUNBEAM RD A	APT 317		
		Addre	SS	
JACKS	JACKSONVILLE, FL 32257			
		City/ State and	l Zip Code	
torresparp	asen@gmail.co	m		
E-ma	il address: (to be us	sed for future annu	ual report	notification)
For further information concerning		se call:	904	365-3617
Name of Contact	-	at (_)
Enclosed is a check for the follow		payable to the Flo		·
	3.75 Filing Fee & tificate of Status	□\$43.75 Filing Certified Cop (Additional co- enclosed))y	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Addr Amendment Sc Division of Co P.O. Box 6327 Tallahassee, FI	rection rporations		Amend Divisio Clifton 2661 E.	Address ment Section n of Corporations Building xecutive Center Circle ssee, FL 32301

Articles of Amendment to Articles of Incorporation of

		· \$ (\$ · (\$ - *) } }
(<u>Name of Corporat</u>	tion as currently filed with the Flori	da Dept. of State)
P19000018118	dota in	(V ⊃ A H. ⊠•a
(Docu	iment Number of Corporation (if know	n)
ursuant to the provisions of section 607,1006, Floric Articles of Incorporation:	da Statutes, this Florida Profit Corpor	ation adopts the following amendment
. If amending name, enter the new name of the c	corporation:	

tme must be distinguishable and contain the wo Corp.," "Inc.," or Co.," or the designation "Corp ord "chartered." "professional association." or the	p." "Inc." or "Co". A professional	The new "incorporated" or the abbreviation corporation name must contain the
Enter new principal office address, if applicable		
rincipal office address <u>MUST BE A STREET AD</u>	(DRESS)	
	 	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u>OX</u> /	
		_
If amending the registered agent and/or registenew registered agent and/or the new registered	ered office address in Florida, enter to diffice address:	the name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:	(City)	. Florida (Zip Code)

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.

Example: X Change	<u>PT</u>	John Doe			
X Remove	<u>V</u>	Mike Jones			
<u>X</u> Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s		
1) Change	S	Robert A. Chacon Ramirez	2550 W 67 PL Building		
X Add			Apt 3222		
Remove			Hialeah, FL 33016		
2) Change	s	Jeffrey R. Salazar Guerrero	3917 Corrida Ct, Unit 1		
X Add			Jacksonville, FL 32217		
Remove					
3) Change					
Add					
Remove					
4) Change					
Add					
Remove					
5) Change		<u> </u>			
Add					
Remove					
6) Change					
Add			 		
Remove					

tach additional sheets, if necessary).	(Be specific)			
				
		-		
				
				···
			···	
an amendment provides for an excl	hange, reclassificat	ion, or cancellatio	on of issued shares	_
rovisions for implementing the ame	ndment if not cont	ained in the amer	dment itself:	-
(if not applicable, indicate N/A)				
		· · · · · · · · · · · · · · · · · · ·		
	·			

the date of each amendment(s) adoption:	, if other than the
Effective date if applicable:	
tho more than 90 days after a	amendment file date)
Note: If the date inserted in this block does not meet the applicable statutor document's effective date on the Department of State's records.	y filing requirements, this date will not be listed as the
Adoption of Amendment(s) (<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopted by the shareholders. The number of v by the shareholders was/were sufficient for approval.	otes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting g must be separately provided for each voting group entitled to vote separate	groups. The following statement By on the amendment(s):
"The number of votes cast for the amendment(s) was/were sufficient for	or approval
by(voting group)	<i>:</i>
(voting group)	
☑ The amendment(s) was/were adopted by the board of directors without share action was not required.	eholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators without sharehold action was not required.	der action and shareholder
Dated 05/04/2019	•
Signature Hull (By a director, president or other officer of director)	- C
selected, by an incorporator – if in the hands of a r appointed fuluciary by that fiduciary)	ecciver, trustee, or other court
MARIELSY ROJAS TORRES	
(Typed or printed name of person	on signing)
VICEPRESIDENT	
(Title of person sign	uing)