Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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COR AMND/RESTATE/CORRECT OR O/D RESIGN SHIPANZE CORP

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Corporate Filing Menu

Help

C. GOLDEN

COVER LETTER

TO: Amendment Section Division of Corporations		
NAME OF CORPORATION: SHIPANZE CO	PRP	
DOCUMENT NUMBER: P19000034806		
The enclosed Articles of Amendment and fee are	submitted for filing.	·· ·
Please return all correspondence concerning this	matter to the following:	
LUCAS EPAMINONDA	S FONTAIN	
·	Name of Contact Perso	n
SHIPANZE CORP		
	Firm/ Company	
7901 CUMBERLAND DI	₹	
	Address	· · · · · · · · · · · · · · · · · · ·
ORLANDO / FLORIDA /	32821	
	City/ State and Zip Cod	le
lucasfontain21@gmail.com		
E-mail address: (to be	used for future annual report	notification)
	·	
For further information concerning this matter, pl	ease call:	
LUCAS EPAMINONDAS FONTAIN	91 (⁷⁰⁷	613-7414
Name of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for the following amount made	de payable to the Florida Depa	ortment of State:
S35 Filing Fee & Certificate of Status		☐S52.50 Filing Fcc 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 Clifton	Address Internal Section on of Corporations Building xecutive Center Circle

Tallahassee, FL 32301

H190001計時893

Articles of Amendment to Articles of Incorporation

2019 JUH - 4 AH 10: 58

SHIPANZE CORP		,1	٠.	· " ,
(Name	e of Corporation as curren	tly filed with the Fiari	da Dept. of State)	HASSEE
19000034806	•			
	(Document Number	of Corporation (if know		
ursuant to the provisions of section 60 s Articles of Incorporation;	7.1006, Florida Statutes, thi	s Florida Profit Corpur	ration adopts the follo	wing amendment(
. If amending name, enter the new	name of the corporation:			
				_ The new
ame must he distinguishable and co "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associ	gnation "Corp." "Inc." or	"Co". A perfessional	incorporated" or th corporation name in	
B. Enter new principal office address Principal office address <u>MUST BE A.</u>	if applicable: STREET ADDRESS)	 .	··-	
				
Enter new mailing address, if app (Mailing address MAY BE A POST	diçable: OFFICE BOX)			
				···
				
. If amending the registered agent a new registered agent and/or the ne	nd/or registered office addresses registered office address	dress in Florida, enter (the name of the	······································
Name of New Registered Agent				
		•		
	(Florida si	reet address)		
New Registered Office Address		(Circl	, Florida	
		(City)	(2	lip Code)
cw Registered Agent's Signature, if the appointment as regis	thanging Registered Agent	t:		
. , , , , , , , , , , , , , , , , , , ,		нап или иссері те ові,	gunons of the positio	n.
	Signature of New 1	Registered Agent, if char	nging	_

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 PT	John Qoe		
X Remove V	Mike Jones		
_X ∧dd <u>SV</u>	Sally Smith		
Type of Action Title (Check One)	Name	∆ddress	
1) Change	Fernando Henrique Torres Canário	7901 Cumberland Park Dr	
XAdd		Apt 08107	
Remove		Orlando FL 32821	
2) Change	· 	÷	
Add			
Remove			
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
	<u> </u>		
Add			

ttach additional sheets, if necessary).	cles enter change(s) here; (Be specific)		
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The date of each amendment(s) adoption: date this document was signed.	, if other than the
Effective date if applicable:	
(no n	nore than 90 days after amendment file date)
Note: If the date inserted in this block does not inco- document's effective date on the Department of State's	et the applicable statutory filing requirements, this date will not be listed as the records.
Adoption of Amendment(s) (CHECK (ONE)
☐ The amendment(s) was/were adopted by the shareholders was/were sufficient for approve	olders. The number of votes east for the amendment(s)
☐ The amendment(s) was/were approved by the share must be separately provided for each voting group	holders through voting groups. The following statement entitled to vote separately on the amendment(s):
"The number of votes east for the amendment	(s) was/were sufficient for approval
by (voting gre	
(voting gre	ομρ)
The amendment(s) was/were adopted by the board of action was not required.	of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporaction was not required.	orators without shareholder action and shareholder
06/03/2019	•
Dated/	· ·
ممر المستنب المسيد	
Signature *	
(By a director president of	r other officer - if directors or officers have not been
selected, by an incorporate appointed fiduciary by tha	or - if in the hands of a receiver, trustee, or other court at fiduciary)
LUCAS EPAMIN	ONDAS FONTAIN
(Typed	or printed name of person signing)
PRESIDENT	
	(Title of person signing)