**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H220004042853)))



H220004042853ABC.

Note: DO NOT hit	the REFRESH/RELO	AD button o	on your b	orowser from	this page.
	Doing so will generate	e another c	over she	et.	

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : TAX TRAINERS INTERNATIONAL CONSULTANTS LLC

Account Number : 120210000123 Phone : (321)315-9576 Fax Number : (321)234-0285

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address:	
tmail Address:	

## COR AMND/RESTATE/CORRECT OR O/D RESIGN VICTORIA SERVICES CONSULTING CORP

Certificate of Status	1
Certified Copy	1
Page Count	05
Estimated Charge	\$52.50

A. RAMSEY
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## **COVER LETTER**

TO: Amendment Section Division of Corporation				
NAME OF CORPOR	NAME OF CORPORATION: VICTORIA SERVICES CONSULTING CORP			
DOCUMENT NUMB				
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	condence concerning this may	tter to the following:		
3	MIGUEL ROMER			
_		Name of Contact Person	I	
7	TAX TRAINERS INTERNA	TIONAL CONSULTANTS	SLLC	
-	· · · · · · · · · · · · · · · · · · ·	Firm/ Company		
3	3585 GRANDE RESERVE WAY APT 209			
-	Address			
(	ORLANDO FL 32837			
-		City/ State and Zip Code	:	
	TAXTRAINERS@GMAIL.COM			
-	E-mail address: (to be used for future annual report notification)			
For further information	concerning this matter, pleas	se call:		
YANETTE ESCALON	<b>A</b>	at ( <sup>321</sup>	315-9576	
Name o	f Contact Person	Area Coo	le & Daytime Telephone Number	
Enclosed is a check for the following amount made payable to the Florida Department of State:				
□ \$35 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		

HLED

2022 DEC -1 PM 1: 05

Articles of Amendment to Articles of Incorporation

(Name of Corporation as currently	filed with the Florida Dept. of State)	
P19000035839		
(Document Number of	Corporation (if known)	
Pursuant to the provisions of section $607.1006$ , Florida Statutes, this $I$ its Articles of Incorporation:	Florida Profit Corporation adopts the following amendment(s) to	
A. If amending name, enter the new name of the corporation;		
N/A	The new	
name must be distinguishable and contain the word "corporation," "c "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A "chartered," "professional association," or the abbreviation "P.A."	projessional Eurporation name inter	
	3050 LOOPDALE LANE	
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	KISSIMMEE FL 34741	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	3050 LOOPDALE LANE	
(.numg units in the same of the same same same same same same same sam	KISSIMMEE FL 34741	
D. If amending the registered agent and/or registered office add new registered agent and/or the new registered office address  Name of New Registered Agent	<u>u</u>	
(Florida st	reet address)	
·	, Florida	
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	t: with and accept the obligations of the position. 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-1 Treusurer; S= Secretary; D:1 Director; TR:1 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 munner. 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>P1</u>	Janu Dos	
X Remove	$\underline{\mathbf{v}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	<u>Name</u>	Address
1) Change		N/A	
Add			
Remove			
2) Change		N/A	
Add			
Remove Change		N/A	
Add			
Remove			
4) Change		N/A	
Add			
Remove			
5) Change		N/A	
Add			
Remove			
6) Change		N/A	
Add			
Remove			· · · · · · · · · · · · · · · · · · ·

To:

	11/30/2022	, if other than the
The date of each amendment(s) as date this document was signed.	loption:	, if other qualities
Effective date if applicable:	·	
	(no more than 90 days after a	nendment file date)
Note: If the date inserted in this bedocument's effective date on the De	lock does not meet the applicable statutory partment of State's records.	filing requirements, this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were add action was not required.	pted by the incorporators, or board of direct	tors without shareholder action and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of verificient for approval.	otes cast for the amendment(s)
☐ The amendment(s) was/were app must be separately provided for	proved by the shareholders through voting greath voting group entitled to vote separate.	roups. The following statement ly on the amendment(s):
"The number of votes cust	for the amendment(s) was/were sufficient for	or approval
by		· · · · · · · · · · · · · · · · · · ·
	(voting group)	
Dated	ER 30TH 2022	-
Signature	rector, president or other officer if director	ors or officers have not been
selecto	d, by an incorporator if in the hands of a reted fiduciary by that fiduciary)	
	YANETTE C ESCALONA	
	(Typed or printed name of person	on signing)
	PRESIDENT	
	(Title of person signing)	