P20000041399

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COVER LETTER

TO: Amendment Section Division of Corporations NAME OF CORPORATION: 2020 VENGROUP INC DOCUMENT NUMBER: __ 20000041399 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MILAGROS SUAREZ Name of Contact Person 2020 VENGROUP INC Firm/ Company 20 BOXWOOD RD Address HOLLYWOOD, FL 33021 City/ State and Zip Code paradisil@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (786 256-1431 Area Code & Daytime Telephone Number HECTOR R PARADISI Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 Filing Fee ■\$43.75 Filing Fee & ☐\$43.75 Filing Fee & ☐\$52.50 Filing Fee Certificate of Status Certificate of Status Certified Copy (Additional copy is Certified Copy enclosed) (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

2020 VENGROUP INC		
(Name o	of Corporation as curren	ntly filed with the Florida Dept. of State)
20000041399		ું
	(Document Number	r of Corporation (if known)
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, th	is Florida Profit Corporation adopts the following amendment(
A. If amending name, enter the new na	ame of the corporation:	
N/A		The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	Corp," "Inc," or "Co".	"company," or "incorporated" or the abbreviation "Corp.," A professional corporation name must contain the word
B. Enter new principal office address, if applicable: (Principal office address <u>MUST BE A STREET ADDRESS</u>)		20 BOXWOOD RD
		HOLLYWOOD, FL. 33021
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		20 BOXWOOD RD
		HOLLYWOOD, FL. 33021
		Idress in Florida, enter the name of the
new registered agent and/or the new		<u>'SS:</u>
Name of New Registered Agent	N/A	
	(Florida)	street address)
New Registered Office Address:	N/A	, Florida
-		(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

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	$\underline{\mathbf{V}}$	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	HECTOR R PARADISI	20 BOXWOOD RD
X Add			HOLLYWOOD FL 33021
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			***
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change	-		
Add			
Remove			

. If amending or adding additional Art (Attach additional sheets, if necessary).	ticles, enter change(s) here: (Be specific)
A	
····	
	
If an amendment provides for an exc	change, reclassification, or cancellation of issued shares,
provisions for implementing the am	endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	
4	
4-	
<u></u>	

	08/03/2020	
The date of each amendment(s	······································	_, if other than the
date this document was signed.	09/15/2020	
Effective date if applicable:	08/15/2020	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in the document's effective date on the	is block does not meet the applicable statutory filing requirements, this date will be Department of State's records.	not be listed as th
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without shareholder action and s	shareholder
The amendment(s) was/were by the shareholders was/wer	adopted by the shareholders. The number of votes cast for the amendment(s) e sufficient for approval.	
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendment(s):	
"The number of votes of	east for the amendment(s) was/were sufficient for approval	
BOARD OF DIRE	CTORS "	
by	(voting group)	
08/03/2 Dated	020	
Signature	Magros Suares	
(By	a director, president or other officer - if directors or officers have not been	_
	ected, by an incorporator – if in the hands of a receiver, trustee, or other court	
app	ointed fiduciary by that fiduciary)	
	MILAGROS M SUAREZ	
	(Typed or printed name of person signing)	
	VP	
	(Title of person signing)	