## P22000049267

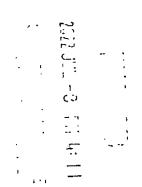
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## **COVER LETTER**

Division of Corporations NAME OF CORPORATION: \_\_\_\_RV VILLA SERVICES, INC P22000049267 DOCUMENT NUMBER: The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: RAFAEL RICARDO VILLAFANE Name of Contact Person RV VILLA SERVICES, INC Firm/ Company 2300 W 84 STREET SUITE 305 Address HIALEAH, FL 33016 City/ State and Zip Code DIFRE24@HOTMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at ( 305 ) 510-4702 ... Area Code & Daytime Telephone Number RAFAEL RICARDO VILLAFANE 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 Certified Copy Certificate of Status (Additional copy is Certified Copy

enclosed)

**Mailing Address** 

TO: Amendment Section

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

(Additional Copy is enclosed)

## Articles of Amendment to Articles of Incorporation of

RV VILLA SERVICES, INC

RV VILLA SERVICES, INC				
	of Corporation as currently	y filed with the Florida Dept. of State	)	
P22000049267		<u> </u>		<u>-</u>
	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	.1006, Florida Statutes, this a	Florida Profit Corporation adopts the f	ollowing	amendment(s
A. If amending name, enter the new na	ame of the corporation:			
name must be distinguishable and contain "Inc.," or Co.," or the designation "C "chartered," "professional association,"	"orp," "Inc," or "Co". A	ompany," or "incorporated" or the abb professional corporation name must	reviation	The new 1 "Corp ," the word
B. Enter new principal office address,	if applicable:	N/A		
(Principal office address MUST BE A S	TREET ADDRESS )	· <u>·</u> ·		
				<del>_</del>
		<del></del>		
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)		N/A		
				25.2.2
				· · ·
D. If amending the registered agent an			,	1
new registered agent and/or the nev	-			ري 
Name of New Registered Agent	N/A			<u> </u>
				<u></u>
	tFlorida stre	vet address)		
New Registered Office Address:		Florida		
	1	City)	(Zip Co	ule)
New Registered Agent's Signature, if cl I hereby accept the appointment as regist	hanging Registered Agent: ered agent. I am familiar w	ith and accept the obligations of the po	sition.	
	Signature of New Re	gistered Agent, if changing		
Check if applicable				

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 = 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	$\underline{V}$	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) X Change	Р	RAFAEL RICARDO VILLAFANE	17325 NW 67 CT APT 'O'
Add			HIALEAH, FL 33015
Remove			
2) X Change	VP	JOHANA ANDREA VILLAFANE	18230 MEDITERRANEAN BLVI
Add			APT 1303
Remove	SEC	DIANA YADIRA VILLAFANE	HIALEAH, FL 33015
3) $X$ Change SEC	DIANA TADIKA VILLAFANE	8122 NW 187 TERRACE	
Add			HIALEAH, FL 33015
Remove			
4) Change			
Add			
Remove			<del></del>
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Attach additional sheets, if necessary).	(Be specific)
·-··	
·	
f an amendment provides for an excl	hange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A)	and the first contained in the amendment user.
	W. C. A. A

The date of each amendment(s) adoption:	, if other than the
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 document's effective date on the Department of State's records.	not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and action was not required.	shareholder
☐ 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)	
Signature  (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	_
Rafael Ricardo Villafane  (Typed or printed name of person signing)	
	<u>.                                  </u>
Prosident.	
(Title of person signing)	