P23000009061

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S. ROBERTS
AUG 1 0 2023

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: V. P. Glectric Sorvices inc
DOCUMENT NUMBER: P230000 90 61
The enclosed Articles of Amendment and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Vladimir Plasensia Camacho Name of Contact Person
U.P. All Services Inc Firm/Company
1901 Pauldo St. Address
Fort Myers F1 33916 City/ State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Miriam Fernandez at (239) 677-4877 Name of Contact Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount made payable to the Florida Department of State:
S35 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certificate of Status (Additional copy is enclosed) Certificate of Status Certificate Opy (Additional Copy is enclosed)
Mailing AddressStreet AddressAmendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327The Centre of TallahasseeTallahassee, FL 323142415 N. Monroe Street, Suite 810Tallahassee, FL 32303

Articles of Amendment Articles of Incorporation of

V. P. Electric Services inc		
P23000009061 (Document Number of		
(Document Number of	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	Florida Profit Corporation adopts the follo	owing amendment(s) to
A. If amending name, enter the new name of the corporation:		
name must be distinguishable and contain the word "corporation," "Inc.," or Co.," or the designation "Corp," "Inc.," or "Co". "chartered," "professional association," or the abbreviation "P.A.	A professional corporation name must co	The new viation "Corp.," ontain the word
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	NIA	
C. Enter new mailing address, if applicable:		2123
(Mailing address MAY BE A POST OFFICE BOX)	N/A	1 1
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 N/A		
(Eli.)	reet address)	
rrioriaa si	reet aaaress)	
New Registered Office Address:	, Florida	(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 posit	ion.
N/A Signature of New F	Registered Agent, if changing	

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	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	 	_N/A	
Add			
Remove			
2) Change			
Add			
Remove Change		_	
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Mach duamona sa	eets, if necessary)	. (Be specific,)			
N/A_						
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				. <u>-</u> .	<u> </u>	
			e .			
f an amendment poper sistems for imp (if not applicable)	ovides for an exc lementing the an	cnange, rectass tendment if not	incation, or call to contained in	the amendmen	t itself:	
<u> N/A</u>						

	nch amendment(s) adoption:	, if other than
Effective date	if applicable: 06-26-2023 (no more than 90 days after amendment file date)	
	ate inserted in this block does not meet the applicable statutory filing requirements, this datective date on the Department of State's records.	ate will not be listed as
Adoption of A	mendment(s) (<u>CHECK ONE</u>)	
	ment(s) was/were adopted by the incorporators, or board of directors without shareholder acti not required.	ion and shareholder
	ment(s) was/were adopted by the shareholders. The number of votes cast for the amendment cholders was/were sufficient for approval.	(s)
	ment(s) was/were approved by the shareholders through voting groups. The following statem parately provided for each voting group entitled to vote separately on the amendment(s):	ent
"The r	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 cou appointed fiduciary by that fiduciary)	
	(Typed or printed name of person signing)	
	(Title of person signing)	

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