P23000036787

(Requestor's Name)	
(Address)	
,	
(Address)	
(City/State/Zip/Phone #)	_
PICK-UP WAIT MAIL	
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(Document Number)	_
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COVER LETTER

TO: Amendment Section

Tallahassee, FL 32314

Division.of.Corpo	rations			
NAME OF CORPOR	ATION: VALENCARG	GO SERVICES CORP		
DOCUMENT NUMB	500000000707			
The enclosed Articles of	of Amendment and fee are su	bmitted for filing.		
Please return all corres	pondence concerning this ma	itter to the following:		
	GUSTAVO 2	ZAMBRANO		
-		Name of Contact Person		
VALENCARGO SERVICES CORP				
Firm/ Company				
3118 REDWOOD NATIONAL DR APT 4004				
-	Address			200
	ORLANDO, FL 32837		된유	ىن ت
City/ State and Zip Code		그는 도	Ξ	
	gustavozambrano@yahoo.com		#35 B	91
-	E-mail address: (to be us	sed for future annual report notification)	OKCIVAN OF STATI TALLAHASSEE, FL	1023 JUN 16 AH 8: 3
For further information	concerning this matter, plea	se call:	LT. IMIE	တ္တ
GUSTAVO ZAM	BRANO	at (_407) 419-4729		
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:		
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & S52.50 Filing Fee Certified Copy (Additional copy is enclosed) S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ame Divis	ing Address ndment Section sion of Corporations Box 6327	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

VALENCARGO SERVICES COF	
	ently filed with the Florida Dept. of State)
P23000036787	
(Document Numb	er of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	his Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	<u>:</u>
	The new
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 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>)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	SECRETALL AND
D. If amending the registered agent and/or registered office and registered agent and/or the new registered office add	ress:
Name of New Registered Agent	F 6 9 9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
	产量 第
(Florid	a street address)
New Registered Office Address:	. Florida
Hew Registered Office Address.	(Zip Code)
New Registered Agent's Signature, if changing Registered Age I hereby accept the appointment as registered agent. I am famili	ent: ar with and accept the obligations of the position.

Signature of New 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.

X Change	PT John	Doe	
X Remove	<u>V</u> <u>Mike</u>	e Jones	
X Add	SV Sally	: Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	MGR	PAOLA ZAMBRANO	3118 REDWOOD NATIONAL DR
X Add			APT 4004 ORLANDO FL 32837
Remove			
2) Change			
Add			
Remove 3) Change			
Add			SECRE /
Remove			
4) Change			45.87 16
Add			
Remove			<u> </u>
5) Change			, <u>w</u>
Add			
Remove			
6) Change			
Add			
Remove			

The date of eac date this docum	th amendment(s) adoption:ent was signed.	, if other than the
Effective date <u>i</u>	•	
	ate.inserted in this block does not meet the applicable statutory filing requirements, this date will ective date on the Department of State's records.	not be listed as the .
Adoption of Ar	mendment(s) (<u>CHECK ONE</u>)	
The amendm action was no	nent(s) was/were adopted by the incorporators, or board of directors without shareholder action and ot required.	shareholder
	nent(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) holders was/were sufficient for approval.	
	nent(s) was/were approved by the shareholders through voting groups. The following statement arately provided for each voting group entitled to vote separately on the amendment(s):	İ
"The n	umber of votes east for the amendment(s) was/were sufficient for approval	1
by		
	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 appointed fiduciary by that fiduciary)	_
	GUSTAVO ZAMBRANO	
	(Typed or printed name of person signing)	
	PRESIDENT (Title of person signing)	TRU JUN 16 MH 8: 35 SEORE FRANCISC STATE