(((H24000264494 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : API PROCESSING Account Number : 120110000069 Phone : (954)567-0013 Fax Number : (954)567-3401

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

Email Address: <u>Annette @ apiprocessing com</u>

## COR AMND/RESTATE/CORRECT OR O/D RESIGN ANCV ELECTRIC INC

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## **COVER LETTER**

TO: Amendment Section Division of Corporations

Division of Cor.	posations					
NAME OF CORPO	PRATION: ANCV ELECTR	ICINC				
DOCUMENT NUM	BER: P2	3000043457				
The enclosed Article	s of Amendment and fee are si	ubmitted for filing.				
Please return all corre	espondence concerning this ma	atter to the following:				
	ANNETTE MOTA					
		Name of Contact Perso	on.			
	API PROCESSING - LICEN					
		Firm/ Company				
	3419 GALT OCEAN DRIVE SUITE A					
	Address					
FORT LAUDERDALE FL 33308						
City/ State and Zip Code				202		
ANNETTE AADDD ACECCDIC COM			SE			
	ANNETTE@APIPROCESSING.COM  E-mail address: (to be used for future annual report notification)		골유			
	E-man address, (to be a	sed for facalo annual repor	i nouncation)	ATA ATA	क्व	
For further information	on concerning this matter, plea	se call:		SECRETARY OF STATE TALLAHASSEE, FL	-6 1	
ANNETTE MOTA		at ( 954	567-0013 X 12 ode & Daytime Telephone Number	OF'S	Ť	Ö
Name	of Contact Person	Area Co	ode & Daytime Telephone Number		 -	
Enclosed is a check for	or the following amount made	payable to the Florida Dep	partment of State:	Ę	2	
S35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐ \$52.50 Filing Fee Cortificate of Status Certified Copy (Additional Copy is enclosed)			
	illing Address endment Section	Street Amen	Address dment Section			

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

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## Articles of Amendment to Articles of Incorporation of

(Name	of Corporation as curren	tly filed with the Florida Dept. of State)	
P23000043457		The state of the s	•
	(Document Number	of Corporation (if known)	<del></del>
Pursuant to the provisions of section 607		s Florida Profit Corporation adopts the following amenda	nent(s) to
•			
A. If amending name, enter the new r	name of the corporation:		
		The ne	שר
name must be distinguishable and contai "Inc.," or Co.," or the designation " "chartered," "professional association,	Corp." "Inc." or "Co".	"company," or "incorporated" or the abbreviation "Corp., A professional corporation name must contain the won"."	'' 'd
B. Enter new principal office address, if applicable:		5251 STEVEN ROAD	
Principal office address MUST BE AS		BOYNTON BEACH FL 33472	
C. Enter new malling address, if appl	licable;	SASI GOODINIA A L	
(Mailing address MAY BE A POST	OFFICE BOX	5251 STEVEN ROAD	
	**	BOYNTON BEACH FL 33472	20
		TAI	2024 AUG
Yes—william alternation of the control of the contr	1/- (	P H	SU.
new registered agent and/or the ne	na/or registered office addres	tress in Marida, enter the name of the S	9-
Name of New Registered Agent	CUDICTOBUCT VANCAC		PH
	5251 STEVEN ROAD		1 կ։ կ2
	(Florida st	reet address)	5
New Registered Office Address:	BOYNTON BEACH	Florida 33472	. •
		(City) (Zip Code)	
lew Registered Agent's Signature, if c hereby accept the appointment as ragist		t: with and accept the obligations of the position.	
		• • • •	
	Christopher Christopher Vargas (Aug 5, 2	<u>VUPUU</u> 1024 20:50 EDT)	
	Signature of New R	Registered Agent, if changing	
heck if applicable			

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (e), F.S.

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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 Dos		
X Remove	<u>v</u>	Mike Jones		
<u>X</u> Add	<u>v2</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s	
1) Change	P	CHRISTOPHER VARGAS	5251 STEVEN ROAD	
X Add			BOYNTON BEACH FL 33472	
Remove	•			
2) Change	•			
Add				
Remove Change			,m	2024
Add			ALL	AUG
Remove			AHASS	9-
4) Change			2880	PH
Add			.33	٠ ئ
Remove				۲ <u>۶</u>
5) Change		_		
Add				
Remove				
6) Change				
Add				
Remove				

E. If amending or adding additional Articles, enter change(s) here: (Attach additional sheets, if necessary). (Be specific)		
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	2024 AUG -6	
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	6.9	
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	3 6	'مسم
provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	. — — — — — — — — — — — — — — — — — — —	T - !!
(If not applicable, indicate total)	न 🔀	-
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,  provisions for implementing the amendment if not contained in the amendment itself:  (if not applicable, indicate N/A)	PH 4: 42	<u> </u>
T.	7 £	, ,
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	August 6, 2024	H24000264494
The date of each amendment(s) adoption: date this document was signed.		, 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 doe document's effective date on the Department	s not meet the applicable statutory filing requirements, this dat of State's records.	te will not be listed as the
Adoption of Amendment(s) (	CHECK ONE)	
☐ The amendment(s) was/were adopted by a action was not required.	the incorporators, or board of directors without shareholder action	on and shareholder
The amendment(s) was/were adopted by the shareholders was/were sufficient f	the shareholders. The number of votes cast for the amendment (stor approval.	;)
	the shareholders through voting groups. The following stateme ing group entitled to vote separately on the amendment(s):	nt
"The number of votes cast for the ar	mendment(s) was/were sufficient for approval	
Luis Vargas	33	
(	voling group)	
Dated 8/5/20	124	
Signature	att of the second of the secon	2024 SEC
selected, by an i	resident or other officer 4 if directors or officers have not been neorporator – if in the hands of a receiver, trustee, or other court ary by that fiduciary)	PIZA AUG -6 P SECRETARY ( TALLAHIASS
Luis Var	gas	RY CF
	(Typed or printed name of person signing)	THE STATE OF
<u>P</u>		: 42 STAT , FL
	(Title of person signing)	<u>m</u>