P23000054534

(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	#)
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(Do	ocument Number)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	ORATION: Aquavista Venture:	s, Inc.	
DOCUMENT NUM	1BER:		
	es of Amendment and fee are sul	omitted for filing.	
Please return all cor	respondence concerning this mat	ter to the following:	
	Michaelle Popovec		
		Name of Contact Person	
	PVF Industrial		
		Firm/ Company	
	425 Hobbs Street		
		Address	· · = · · · · ·
	Tampa, FL 33619		
		City/ State and Zip Code	
	michaelle4p@gmail.com		
	E-mail address: (to be us	ed for future annual report	notification)
For further informat	ion concerning this matter, pleas	e call:	
Michaelle Popovec		at (478-0637
Nam	e of Contact Person	Area Coo	le & Daytime Telephone Number
Enclosed is a check	for the following amount made	payable to the Florida Depa	irtment of State:
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy	\$52.50 Filing Fee Certificate of Status

Mailing Address

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address

(Additional copy is

enclosed)

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Certified Copy (Additional Copy

is enclosed)

Articles of Amendment to Articles of Incorporation of

Aquavista Ventures, Inc	
(Name of Corporation as curren	tly filed with the Florida Dent. of State)
P23000054534	
(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
	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.	A professional corporation name must contain the word
B. Enter new principal office address, if applicable:	425 Hobbs Street
(Principal office address MUST BE A STREET ADDRESS)	Tampa, FL 33619
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	425 Hobbs Street
, , , , , , , , , , , , , , , , , , , ,	Tampa, FL 33619
D. If amending the registered agent and/or registered office adnew registered agent and/or the new registered office address N/A Name of New Registered Agent	dress in Florida, enter the name of the
(Florida s	street address)
New Registered Office Address:	, Florida
	(City) (Zip Code) G
New Registered Agent's Signature, if changing Registered Ager I hereby accept the appointment as registered agent. I am familian	nti r with and accept the obligations of the position.
Signature of Nov	Registered Agent, if changing
	педыется адень у стандид
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: XChange	<u>PT</u>	John Doe		
X Remove	<u>V</u>	Mike Jones		
<u>X</u> Add	<u>sv</u>	Sally Smith		
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address	
1) X Change	PTD	Michaelle Popovec	2709 W Bay Ave	
Add			Tampa, FL 33611	
Remove			410.14	
2) X Change	VSD	Israel Barnes	410 Montrose Ave	
Add			Tampa, FL 33617	
Remove 3) Change	D	Frederick Barnes		
Add			15852 Sanctuary Dr	
X Remove			Tampa, FL 33647	
4) Change				
Add				
Remove				
5) Change				
Add			= = = = = = = = = = = = = = = = = = = =	
Remove			10 m	
6) Change				i
Add				
Remove				

ttach additional sheets, if necessary). (Be specific)	
<u> </u>	
an amendment provides for an exchange, reclassification, or cancellation of is	sued shares.
provisions for implementing the amendment if not contained in the amendment	t jtself:
(if not applicable, indicate N/A)	
	in
	(E)
	7, -53
	22 733
	75
	77.77 17.77 10.77 10.77

•

	7/24/2023	
The date of each amendment(s) ad date this document was signed.	option:	, if other than the
7/24/	2023	
Effective date if applicable:	(no more than 90 days after amendment file date)	
Note: If the date inserted in this bl document's effective date on the Dep	ock does not meet the applicable statutory filing requirements, this date weartment of State's records.	ill not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were adopaction was not required.	oted by the incorporators, or board of directors without shareholder action as	nd shareholder
■ The amendment(s) was/were ado by the shareholders was/were suf	oted by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
☐ The amendment(s) was/were appropriately provided for a	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast i	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
selected	rector, president or other officer – if directors or officers have not been, by an incorporator – if in the hands of a receiver, trustee, or other court	
	ed fiduciary by that fiduciary	
	Michaelle Popovec	
•	(Typed or printed name of person signing)	
	President	
•	(Title of person signing)	202

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