Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000055698 3)))



H240000556983ABC6

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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : L & R INTERNATIONAL FIRM INC

Account Number : I20200000026 Phone : (305)987-6865

Fax Number : (305)222-9004

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

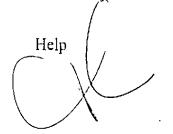
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## COR AMND/RESTATE/CORRECT OR O/D RESIGN WILVIMAR SERVICES INC

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2024 FED - 9 FM 3-00

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## **COVER LETTER**

TO: Amendment Sec Division of Cor					
NAME OF CORPO	DRATION: WILVIMAR SERV	VICES INC	·		
DOCUMENT NUM	P24000005912				
The enclosed Article	s of Amendment and fee are su	bmitted for filing.			
Please return all corr	espondence concerning this ma	tter to the following:			
	WIL M VILORIA CASTRO				
		Name of Contact Person		<b>26</b> 5	
		Firm/ Company		PAR PAR PAR PAR PAR PAR PAR PAR PAR PAR	<b>42.14</b>
	1936 SW 2ND ST, APT 12			B-C	
	MIAMI, FL 33135	Address		2024 FEB -9 AM 10: 49 SECRETARY OF STATE TALLAHASSEE, FL	•
		City/ State and Zip Code		ID: 19	•
	E-mail address: (to be us	sed for future annual report	notification)	pr.	
For further informati	on concerning this matter, pleas	se call:			
WIL VILORIA CAS	STRO	at (	6005933		
Name	of Contact Person	Area Co	de & Daytime Telephone Number	<u> </u>	
Enclosed is a check	for the following amount made	payable to the Florida Depa	artment of State:		
\$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ar Di P.	ailing Address mendment Section vision of Corporations O. Box 6327 Illahassee, FL 32314	Amend Divisio The C 2415 Y	Address Iment Section In of Corporations Entre of Tallahassee N. Monroe Street, Suite 810 Issee, FL 32303		

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## Articles of Amendment to Articles of Incorporation of

(Name of Corporation	as currently filed with the Florida Dept	t. of State)
P24000005912		
(Documer	t Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida S ts Articles of Incorporation:	atutes, this Florida Profit Corporation ad	dopts the following amendment
A. If amending name, enter the new name of the corp	oration:	
N/A	·	5024 1707
name must be distinguishable and contain the word "corp "Inc.," or Co.," or the designation "Corp," "Inc," o "chartered," "professional association," or the abbrevio	r "Co". A professional corporation n	name must contain the worth
3. Enter new principal office address, if applicable:	N/A	9 <b>2</b>
Principal office address <u>MUST BE A STREET ADDR</u>	<u>ESS</u> )	EF 5
		FA
	<del></del>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	. N/A	
	,	
		<del></del>
<ol> <li>If amending the registered agent and/or registered new registered agent and/or the new registered of</li> </ol>	office address in Florida, enter the nation address:	me of the
Name of New Registered Agent	ice address:	
Trune of their Registered Agent		<del></del>
<del>1</del>	(Florida street address)	
New Registered Office Address:		Florida
Test registered Office Medicas.	(City)	Zip Code)
New Registered Office Address:	(City)	Florida(Zip Cade)
New Registered Agent's Signature, if changing Regis	ered Agent:	
hereby accept the appointment as registered agent. I d	m familiar with and accept the obligation	is of the position.

☐ 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	<u>PT</u>	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address (A)
l) Change	<u>P</u>	VILORIA CASTRO, OSWALDO M	Address 1936 SW 2ND ST APT 12 FE
Add X Remove			MIAMI, FL 33135
2) Change	<u>P</u>	WILL M VILORIA CASTRO	AM 10: 49 SSEE, FL
Add			
Remove 4) Change Add			
Remove 5) Change Add			
Remove  Change  Add	<del></del>		
Remove			

H2400005569	8	3
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f amending or adding additional Art Attach additional sheets, if necessary).	(Be specific)		
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	7.20.00		
f an amendment provides for un exc	change, reclassification, or cancellation of issued shares,		
provisions for implementing the am	endment if not contained in the amendment itself:		
(if not applicable, indicate N/A)			
	***************************************	,	
		<u>.                                    </u>	
<del> </del>			

The date of each amendment(s) adopted date this document was signed.	ion:	, if other than the
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Departs	does not meet the applicable statutory filing requirements, the ment of State's records.	is date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adopted action was not required.	by the incorporators, or board of directors without shareholder	action and shareholder
☐ The amendment(s) was/were adopted by the shareholders was/were suffici	by the shareholders. The number of votes cast for the amendment for approval.	• •
must be separately provided for each	ed by the shareholders through voting groups. The following state voting group entitled to vote separately on the amendment(s):  the amendment(s) was/were sufficient for approval	B-9
by	(voting group)	AMID: 45
Signature	1.1 Vitoria Coporno	
selected, by	or, president or other officer – if directors or officers have not by an incorporator – if in the hands of a receiver, trustee, or other iduciary by that fiduciary)	
WII	L M VILORIA CASTRO	
	(Typed or printed name of person signing)	
PRI	ESIDENT	
<del></del>	(Title of person signing)	