P24000030391

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COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION	N:	RIES INC		
DOCUMENT NUMBER: P	24000030391			
The enclosed Articles of Amer	adment and fee are su	bmitted for fili	ng.	
Please return all corresponden	ce concerning this ma	tter to the follo	wing:	
BREM	NER, ADRIANO			
	•	Name of Co	ontact Persor	1
VALM	AR FISHERIES INC			
		Firm/ C	Company	
7300 B	YRON AVE APT 5 N	ијамі веасі	H, FL 33141	
		Ade	dress	
MIAM	BEACH, FLORIDA	33141		
		City/ State a	and Zip Code	
JIMEN	EZACCOUNTING@	GMAILCOM		
——————————————————————————————————————	nail address: (to be us	sed for future a	nnual report	notification)
For further information concer	ning this matter, pleas	se call:		
BREMNER, ADRIANO		at (786	853-4515
Name of Conta			de & Daytime Telephone Number	
Enclosed is a check for the fol	lowing amount made	payable to the	Florida Depa	artment of State:
-	\$43.75 Filing Fee & Certificate of Status	\$43.75 Fi Certified ((Additiona enclosed)	Сору	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Ad- Amendment Division of 0 P.O. Box 63 Tallahassee,	Section Corporations 27		Amend Divisio The Co 2415 N	Address ment Section n of Corporations entre of Tallahassee N. Monroe Street, Suite 810 ussee, FL 32303

Articles of Amendment to Articles of Incorporation of

VALMAR FISHERIES INC.

(Name of Corporation as cur	rently filed with the Florida Dept. of State)
P24000030391	
(Document Num	ber of Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation	n:
	The new
	n," "company," or "incorporated" or the abbreviation "Corp.," ". A professional corporation name must contain the word P.A."
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)	
D. If amending the registered agent and/or registered office	address in Florida, enter the name of the
new registered agent and/or the new registered office ade	
Name of New Registered Agent	
(Flori	da street address)
New Registered Office Address:	(City), Florida (Zip Code)
	1- 27
New Registered Agent's Signature, if changing Registered A lamfami	gent: liar with and accept the obligations of the position.
Signature of N	lew Registered Agent, if changing
Check if applicable	

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

Example:

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 Do	<u>oe</u>	
X Remove	$\underline{\mathbf{v}}$	Mike Jo	nes	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	<u>Addres</u> s
1) Change	T		MIGLIORINO, MARCELLO	7300 BYRON AVE APT 5
Add				MIAMI BEACH, FL 33141
X Remove 2) Change			VALDIVIA, FABRIZIO E	7300 BYRON AVE APT 5
Add		_		MIAMI BEACH, FL 33141
X Remove 3) Change		_	.	
Add				
Remove 4) Change				
Add				
5) Change		-		
Add				
Remove 6) Change		_		
Add				
Remove				

ittaen aaattional S	sheets, if necessary).	(Be specific)				
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an amendment	provides for an exch	ange, reclassific	ation, or cancel	ation of issued s	shares,	
rovisions for im (if not applica	plementing the amenable, indicate N/A)	ndment if not co	ntained in the a	mendment itself	<u>f:</u>	
(9 //s/ -///	, , , , , , , , , , , , , , , , , , , ,					
	<u> </u>			· · · · ·		
						

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The date of each amendment(s	adoption:	, if other than the
date this document was signed.		
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in thi document's effective date on the	s block does not meet the applicable statutory filing requirements, Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were action was not required.	adopted by the incorporators, or board of directors without sharehold	der action and shareholder
■ The amendment(s) was/were by the shareholders was/were	adopted by the shareholders. The number of votes cast for the amen sufficient for approval.	idment(s)
	approved by the shareholders through voting groups. The following for each voting group entitled to vote separately on the amendment().	
"The number of votes ca	ast for the amendment(s) was/were sufficient for approval	
by	.,	
· ·	(voting group)	
OCTOB Dated	ER 30TH 2024	
Signature	director, president or officer officer - 11 directors or officers have no	
selec	eted, by an incorporator – if in the hands of a receiver, trustee, or other	ner court
	inted fiduciary by that fiduciary)	
	BREMNER, ADRIANO	
	(Typed or printed name of person signing)	
	p	
	(Title of person signing)	