Florida Department of State

Division of Corporations
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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name : WF TAXES AND MORE INC.

Account Number : I202000000043 Phone : (772)879-0010

Fax Number : (772)281-5520

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

Email Address: Luftaxos. Office @ amail.com

COR AMND/RESTATE/CORRECT OR O/D RESIGN PROVIDENCIAL 01 INC

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Corporate Filing Menu

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COYERLETTER

TO: Amendment So Division of Cor			
NAME OF CORPO	PROVIDENCIAL	01 INC	
	BER: P24000067178		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all corr	espondence concerning this ma	utter to the following:	
	MAURICIO SALAS		
		Name of Contact Person	<u> </u>
	PROVIDENCIAL 01 INC		
	· 	Firm/ Company	
	650 SW PALMETTO COVI	•	
		Address	
	PORT ST LUCIE, FL 34986		
		City/ State and Zip Code	•
	wflaxes.office@gmail.com		
	E-mail address: (to be us	sed for future annual report	notification)
For further informati	on concerning this matter, plea	se call:	
MAURICIO SALAS		at (879-0010
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
■ \$35 Filing Fee	S43.75 Filing Fee & Certificate of Status	☐\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)
	filme Address		Address
	endment Section		ment Section
	rision of Corporations 1. Box 6327		n of Corporations entre of Tallahassee
P.U. Box 63/7 Tallahassee, FL 32314			N. Monroe Street, Suite 810
181			sace, FL 32303

To: +18506176380

Articles of Amendment to Articles of Incorporation of

PROVIDENCIAL 01 INC		
(Name of Corporation at cur	rently filed with the Florida Dept. of Stat	D)
P24000067178		
(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)
A. If amending name, exter the new name of the cornoration	Ri.	_
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 "I	" A professional corporation name mus	The new breviation "Corp" t contain the word
B. Enter new principal office address, if applicable:		20
(Principal office address MUST BE A STREET ADDRESS)		74
		2024 NOV
C. Enter new malling address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		ب
D. If amending the registered agent and/or registered office new registered agent and/or the new registered office add		
Name of New Registered Agent		
(Floria	da street address)	
	,	
New Registered Office Address:	(City) Florida	(Zip Code)
	,, ,	(-7)
New Registered Agent's Signature, if changing Registered A.	gest:	
I hereby accept the appointment as registered agent. I am famil	liar with and accept the obligations of the p	osition.
Signature of Ne	rw Registered Agent, if changing	
•		
Check if applicable	(ID () T.E.	
☐ The amendment(s) is/are being filed pursuant to s. 607.0120 ((11) (e), F.S.	

To: +18506176380

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; CE() = 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:

X Change	EI Top	n Doe		
X Remove	Y MU	ke Jones		
_X Add	SY Sal	ly Smith		
Type of Action (Check One)	Title	Name	Address	
1) Change	<u>VP</u>	ALEXANDRA A SANCHEZ	650 SW PALMETTO COVE	
X Add			PORT ST LUCIE, FL 34986	_
Remove				2024 1104 - 1
2) Change				- 10
Add				- 1
Remove 3) Change				1 9: 15
Add				
Remove				-
4) Change			 	-
Add				
Remove				-
5) Change		<u></u>		
Add				_
Remove				-
δ) Change			·	_
Add				
Remove				_

Lamending or adding additional Articles, enter change(a) here. (Attach additional sheets, if nevestary) — (Be specific)	
	
	
	
	
	
	
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	2024 140 1/2 - 1 141 1
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	_
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)	
	
	
	

	11/01/2024	
The date of each amendment(s) add date this document was signed.	option:	_, if other than the
Effective date applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blo document's effective date on the Dep	ick does not meet the applicable statutory filing requirements, this date will artment of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/were adoption was not required.	sted by the incorporators, or board of directors without shareholder action and	shareholder
☐ The amendment(s) was/were adop by the shareholders was/were suff	sted by the shareholders. The number of votes east for the amendment(s) ficient for approval.	2024 1404
The amendment(s) was/were appromists be separately provided for e	oved by the shareholders through voting groups. The following statement ach voting group entitled to vote separately on the amendment(s):	708 -
"The number of votes cast fo	or the amendment(s) was/were sufficient for approval	
by	(voting group)	-
	(Young group)	•
11/1/2024		I
Dated		
6:	Yauvinia Salas	
Signature (By a din	ector, 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	f fiduciary by that fiduciary)	
N	MAURICIO SALAS	
-	(Typed or printed name of person signing)	
Р	RESIDENT	
_	(Title of person signing)	