# P93000033690

(Re	equestor's Name)	
(Ac	ldress)	
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(Cir	ty/State/Zip/Phone	· #)
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(Do	ocument Number)	<u></u>
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2010 FSR 28 AM 5: 16

Amend CC

MAR 29 2018 I ALBRITTON

#### COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPORAT	ME OF CORPORATION:VENTURE MANAGEMENT SERVICES, INC.					
OCUMENT NUMBER:P93000033690						
The enclosed Articles of A	mendment and fee are su	bmitted for filing.				
lease return all correspon	dence concerning this may	tter to the following:				
		ELSA P. MARRERO				
		Name of Contact Person				
		PREMIER GROUP				
Firm/ Company						
	703 WATERFORD WAY, SUITE 500 Address					
<del></del>						
MIAMI, FL 33126						
<del></del> -		City/ State and Zip Code				
	elsa	_marrero@premierway.com	n			
	E-mail address: (to be us	sed for future annual report	notification)			
For further information co	ncerning this matter, pleas					
ELSA P. MARREI	RO	at (	_) 567-3188 X235 de & Daytime Telephone Number			
Name of C	ontact Person	Area Code & Daytime Telephone Nu				
Enclosed is a check for the	e following amount made	payable to the Florida Depa	rtment of State:			
□ \$35 Filing Fee	□\$43.75 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)			
	Address		Address			
	nent Section of Corporations	Amendment Section Division of Corporations				
P.O. Bo	x 6327	Clifton	Building			
Tallahas	sec. FL 32314	2661 Executive Center Circle				

Tallahassee, FL 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

March 16, 2018

ELSA P. MARRERO PREMIER GROUP 703 WATERFORD WAY - STE. 500 MIAMI, FL 33126

SUBJECT: VENTURE MANAGEMENT SERVICES, INC.

Ref. Number: P93000033690

We have received your document for VENTURE MANAGEMENT SERVICES, INC. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The application/form submitted does not meet the requirements of this office; please complete the attached application/form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

Letter Number: 118A00005363

18 MAR 28 PH 3: 59
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

### **Articles of Amendment** Articles of Incorporation

VENTURE MANA	GEMENI SEKVI	JES, INC.	
(Name of Corporation as	currently filed wit	th the Florida Dept. of S	State)
P9:	3000033690		
(Document N	Number of Corporati	ion (if known)	
Pursuant to the provisions of section 607.1006, Florida Stati its Articles of Incorporation:	utes, this <i>Florida Pi</i>	rofit Corporation adopts	the following amendment(s) to
A. If amending name, enter the new name of the corpor	ation:		
N/A			The new
name must be distinguishable and contain the word "cc "Corp.," "Inc.," or Co.," or the designation "Corp," "In word "chartered," "professional association," or the abbre	nc." or "Co". A p		
B. Enter new principal office address, if applicable:		N/A	
(Principal office address MUST BE A STREET ADDRES	<u></u>		200
	-		一些事工
C. Enter new mailing address, if applicable:			a m
(Mailing address MAY BE A POST OFFICE BOX)		N/A	1915
			-0.
			是市
D. If amounting the surface of a surface of			41.
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		orida, enter the name of	tne
Nama of Nam Bagintonad Azont	N/A		
Name of New Registered Agent			
·	ri:111		
(2	Florida street address	!	
New Registered Office Address:	(Cir.)	, Flor	
	(City)		(Zip Code)
New Registered Agent's Signature, if changing Registered I hereby accept the appointment as registered agent. I am		ccept the obligations of t	he position.
Signature	of New Registered	Agent, if changing	

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: X Change	<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)	Title	Name	<u>Addres</u> s			
1) X Change	PS	FERMIN RODRIGUEZ	11023 SW 59 CT			
Add			MIAM1, FL 33156			
Remove						
2) Change	<u>T</u>	MAYRA I. ROMANACH	11023 SW 59 CT			
X Add			MIAMI, FL 33156			
Remove						
3) Change						
Add						
Remove						
4)Change	<u> </u>					
Add						
Remove						
5) Change						
Add						
Remove						
6) Change						
Add						
Remove						

	itional sheets, if ned N/A						
	19/A			<del></del>			
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					<del></del> -		
'on omon	idment provides fo	or an exchan	nge reclassific	ation or cance	llation of issued sl	vares.	
	s for implementin	g the amend	ment if not co	ntained in the	mendment itself:		
orovision	t applicable, indica	ite N/A)			<del></del>		
orovisio <u>n</u>							
orovisio <u>n</u>	N/A						
provisio <u>n</u> :	N/A						····
orovisio <u>n</u>	N/A						
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provisio <u>n</u> :	N/A						
provisio <u>n</u> :	N/A						

The date of each amendment(s) adoption: date this document was signed.	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more that	1 90 days after amendment file date)
Note: If the date inserted in this block does not meet the appropriate document's effective date on the Department of State's records	plicable statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. It by the shareholders was/were sufficient for approval.	'he number of votes east for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders to must be separately provided for each voting group entitled	
"The number of votes cast for the amendment(s) was/v	vere sufficient for approval
by	.,
(voting group)	
☐ The amendment(s) was/were adopted by the board of direct action was not required.	ors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the incorporators was not required.	rithout shareholder action and shareholder
Dated	
Signature	
	fficer – if directors or officers have not been the hands of a receiver, trustee, or other court ry)
FERMIN	NRODRIGUEZ
(Typed or printe	ed name of person signing)
PRESI	DENT
(Tit	le of person signing)