

P94000061582

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

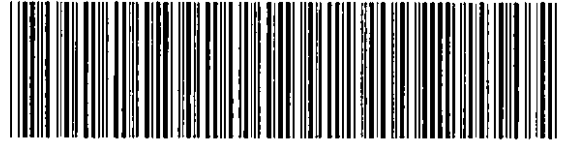
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/23/23--01015--016 **35.00

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 3, 2023

LOIS PHILPSON
415 LIVE OAK DRIVE
VERO BEACH, FL 32963

SUBJECT: VERO LIFESTYLES, INC.
Ref. Number: P94000061582

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

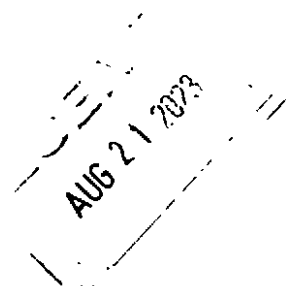
Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

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.

Shaunteria Cobbs
Regulatory Specialist II

Letter Number: 523A00017556



Articles of Amendment
to
Articles of Incorporation
of

Vero Lifestyles, Inc

(Name of Corporation as currently filed with the Florida Dept. of State)

P94000061582

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

n/a

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

n/a

C. Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

n/a

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 address:

Name of New Registered Agent

n/a

(Florida street address)

New Registered Office Address:

n/a

(City)

Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position

n/a

Signature of New 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)

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:

☒ Change PT John Doe
☐ Remove V Mike Jones
☒ Add SV Sally Smith

Type of Action
(Check One)

Title

Name

Address

1) ☐ Change

C

DIANA A. SPENCER

11155 Roseland Road
#2

☐ Add

☒ Remove

Sebastian, FL

2) ☐ Change

n/a

32958

☐ Add

☐ Remove

3) ☐ Change

n/a

☐ Add

☐ Remove

4) ☐ Change

n/a

☐ Add

☐ Remove

5) ☐ Change

n/a

☐ Add

☐ Remove

6) ☐ Change

n/a

☐ Add

☐ Remove

23 AUG 21 PM 2:58

F. If amending or adding additional Articles, enter change(s) here:
(Attach additional sheets, if necessary) (Be specific)

n/a

F. If 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)

n/a

The date of each amendment(s) adoption: n/a, if other than the date this document was signed.

Effective date if applicable: n/a
(no more than 90 days after amendment file date)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) (CHECK ONE)

☒ The amendment(s) was/were adopted by the incorporators, or board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____"
(voting group)

Dated 6/19/2023

Signature

Lois Philipson

(By a director, 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 fiduciary by that fiduciary)

Lois PHILIPSON

(Typed or printed name of person signing)

SECRETARY

(Title of person signing)

VERO LIFESTYLES, INC.
415 LIVE OAK DRIVE
VERO BEACH, FL 32963

338

63-215 570
32

6/19/23

Pay to the
Order of

Florida Department of State
Thirty five Dollars & 00/100

Date

\$35.00
Dollars



Seacoast
NATIONAL BANK

For

DOC P 940000 61532

Lois Philipson

SEBASTIAN, FLORIDA 32958
⑆067005158⑆

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