569800

(Requestor's Name)			
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phone	e #)	
	—	—	
PICK-UP	MAIT	MAIL	
(Bu	siness Entity Nar	ne)	
(Do	cument Number)		
Certified Copies	_ Certificates	of Status	
Special Instructions to	Filing Officer:		
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COVER LETTER

TO: Amendment Section Division of Corporations NICK VERGOULIAS ENTERPRISES INC. NAME OF CORPORATION: DOCUMENT NUMBER: \$69800 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: Nancy Vergoulias Name of Contact Person Firm/ Company 15245 SW 172nd Street Address Miami, Fl 33187 City/ State and Zip Code nmverg@icloud.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Nancy Vergoulias Area Code & Daytime Telephone Number Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: ☐ \$35 Filing Fee ☐ \$43.75 Filing Fee & ☐ **\$**43.75 Filing Fee & \$52.50 Filing Fee Certificate of Status Certified Copy Certificate of Status (Additional copy is Certified Copy enclosed) (Additional Copy is enclosed)

Mailing Address
Amendment Section

Division of Corporations
P.O. Box 6327

Street Address

Amendment Section
Division of Corporations
The Centre of Tallahassee

Articles of Amendment Articles of Incorporation

NICK VERGOULIAS ENTERPRISES INC.

(Name of	Corporation as currently	filed with the Florida Dept. of State)		
\$69800				
•	(Document Number of	Corporation (if known)		
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	006, Florida Statutes, this F	Clorida Profit Corporation adopts the fo	ollowing amendme	nt(s) to
A. If amending name, enter the new nam	ne of the corporation:			
			The new	
name must be distinguishable and contain to "Inc.," or Co.," or the designation "Co "chartered." "professional association," o	orp," "Inc," or "Co". A	professional corporation name must	reviation "Corp.," contain the word	
P. Unter new principal office address if	annlicable:	15245 SW 172nd Street		
B. Enter new principal office address, if (Principal office address MUST BE A ST)		Miami, Fl 33187		
			201	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		15245 SW 172nd Street	20/20 OCT	
		Miami, Fl 33187	<u></u>	
			8	ا د د د العسر
D. If amending the registered agent and new registered agent and/or the new		ess in Florida, enter the name of the	, t2	•
	Nancy Vergoulias			
	15245 Sw 172nd Street			
-	(Florida stre	et address)		
New Registered Office Address:	Miami	. Florida	331 87	
New Registered Office Address.	(City)	(Zip Code)	
New Registered Agent's Signature, if cha	onging Degistered Agents			
I hereby accept the appointment as register	red agent. I am familiar wit	h and accept the obligations of the posi	ition.	
1	C			
Your war	2 Tu Coule De			
- meney	Signature of New Re	gistered Agent, if changing		
Charlest and Stable	v			
Check if applicable ☐ The amendment(s) is/are being filed pur	suant 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.

Example:

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) 1) Change	<u>Title</u> V	Name George Vergoulias	<u>Addres</u> s
Add Remove	P, T, S. D	Nancy Vergoulias	15245 Sw 172st
Add Remove 3)X Change	VP, D	Nicholas G. Vergoulias	Miami, FI 33187
3) X Change Add			Miami, FI 33187
Remove 4) X Change	VP, D	Nathalie Vergoulias	Miami, Fl 33187
Add Remove 5) Change			
Add			-
6)Change Add Remove			

attach additional sheets, if necessary).	(Be specific)
	
an amendment provides for an avaluation	ange mederalisetion
rovisions for implementing the amer	ange, reclassification, or cancellation of issued shares, adment if not contained in the amendment itself:
(if not applicable, indicate N/A)	and different times.

The date of each amendment(s) ad date this document was signed.	option:	, if other than th
•		
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date	re)
Note: If the date inserted in this bloc document's effective date on the De	k does not meet the applicable statutory filing requirements, partment of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were adoption was not required.	ted by the incorporators, or board of directors without shareho	older action and shareholder
☐ The amendment(s) was/were ado by the shareholders was/were sur	oted by the shareholders. The number of votes cast for the antificient for approval.	nendment(s)
	oved by the shareholders through voting groups. The following aroup entitled to vote separately on the amendment	
"The number of votes cast i	or the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
Dated //	9-2-20	
Signature	new-tirgerillar)	
(By a di	ector, president or/other officer if directors or officers have	
selected appoint	by an incorporator — if in the hands of a receiver, trustee, or diffiguriary by that fiduciary)	r other court
при	A Committee of the comm	
_	Mancy Vergoulias	
	(Typed or printed name of person signing)	
	President.	
-	(Title of person signing)	