P10000052591

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(Ad	dress)	
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(Cit	y/State/Zip/Phone	<i>⇒</i> #)
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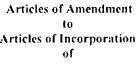
DEC 18 2017 C MCNAIR

COVER LETTER

TO: Amendment Section
Division of Corporations

	COVER LETTER		رئیجند
CO: Amendment Section Division of Corporations			TORS I MADE
NAME OF CORPORATION: V & V DELUXE	MULTI CORP		2
DOCUMENT NUMBER: P10000052591			C.
The enclosed Articles of Amendment and fee are su			
Please return all correspondence concerning this ma	tter to the following:		
EULICES VALDES			
	Name of Contact Persor	1	
V & V DELUXE MULTI CO			
	Firm/ Company		
1701 SW 73 AVE			
	Address		
MIAMI FL 33155	<u> </u>		
	City/ State and Zip Code	e	
MARENVIO40@GMAIL.COM			
E-mail address: (to be us	sed for future annual report	notification)	
For further information concerning this matter, pleas	se call:		
EULICES VALDES	786	5218916	
Name of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check for the following amount made	payable to the Florida Depa	artment of State:	
■ \$35 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)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Fl. 32314	Amend Divisio Clifton 2661 E	Address Iment Section on of Corporations Building Executive Center Circle assee, FL 32301	

Articles of Incorporation



V & V DELUXE MULTI CORP

(Name of Corporation as curren	itiv filed with the Florida Dept. of State)	
P10000052591		
(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607.1006, Florida Statutes, thi its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)	
A. If amending name, enter the new name of the corporation:		
	The new	
name must be distinguishable and contain the word "corporati "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the	
B. Enter new principal office address, if applicable:	1701 SW 73 AVE	
(Principal office address MUST BE A STREET ADDRESS)	MIAMI FL 33155	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1701 SW 73 AVE	
	MIAMI FL 33155	
D. If amending the registered agent and/or registered office adnew registered agent and/or the new registered office address Name of New Registered Agent REMAINS THE SAME		
Whavida s	street address)	
New Registered Office Address:	, Florida // (City) // (Zip Code)	
New Registered Agent's Signature, if changing Registered Ager I hereby accept the appointment as registered agent. I am familian	nt: r with and accept the obligations of the 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 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 Doe		
X Remove	<u>V</u>	Mike Jon	<u>es</u>	
X Add	<u>\$V</u>	Sally Smi	i <u>th</u>	
Type of Action (Check One)	<u>Title</u>	ì	<u>Name</u>	<u>Addres</u> s
1) Change	VP		ALEXANDER CALDERON	1701 SW 73 AVE
X Add				MIAMI FL 33155
Remove				
2) Change		 -		
Add				
Remove				
3) Change				
Add				
Remove				
4) Change		_		
Add		_		
Remove				
5/ Change				
Add				
Remove				
6) Change		 -		
Add				
Remove				

<u>If amending or adding additional Arti</u> Attach <i>additional sheets, if necessary).</i>	(Be specific)
 	
	
If an amendment provides for an exch	nange, reclassification, or cancellation of issued shares,
provisions for implementing the ame (if not applicable, indicate N/A)	indment if not contained in the amendment itself:
(g ma approxime production)	
	
	
<u>. </u>	
- 	

•	12-12-2017	
The date of each amendment(s)		, if other than the
date this document was signed.	-12-2017	
Effective date if applicable:		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this document's effective date on the f	block does not meet the applicable statutory filing requirements, this department of State's records.	date will not be listed as the
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
The amendment(s) was/were ac by the shareholders was/were	dopted by the shareholders. The number of votes cast for the amendment sufficient for approval.	nt(s)
	proved by the shareholders through voting groups. The following state or each voting group entitled to vote separately on the amendment(s):	rment
	it for the amendment(s) was/were sufficient for approval	
bv	(voting group)	
	(voting group)	
	dopted by the board of directors without shareholder action and shareho	ilder
☐ The amendment(s) was/were a action was not required.	lopted by the incorporators without shareholder action and shareholder	
DatedSignature	17 1. Jak	
(By a select	director, president or other officer – if directors or officers have not be ed, by an incorporator – if in the hands of a receiver, trustee, or other onted fiduciary by that fiduciary)	
	EULICES VALDES	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	