N05000001260

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Eddiness Entry Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



600376925346



11/29/21--01018--018 **35.00



A. RAMSEY DEC 14 2021

COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, Fl. 32314

NAME OF CORPORATION:	VIV, INC. 	· · · · · · · · · · · · · · · · · · ·		
DOCUMENT NUMBER:	<u>-</u> -			
The enclosed Articles of Amendment and fee	e are submitted for filing.			
Please return all correspondence concerning	this matter to the following:			
Fabienne Montpeirous				
	(Name of Contact F	Person)		
Fo Haiti Viv, Inc				
	(Firm/ Compar	ıy)		
8395 SW 186 ST				
	(Address)			
Cutler Bay, FL 33157				
	(City/ State and Zip	Code)		
fabibi22@yahoo.com				
E-mail address: (t	o be used for future annual re	eport notificatio	n)	
For further information concerning this matter	er, please call:			
Fabienne Montpeirous	а	305	3705200	
(Name of Contact			(Daytime Telephone Number)	
Enclosed is a check for the following amount	t made payable to the Florida	Department of	State:	
S35 Filing Fee	-	is Certif	0 Filing Fee ficate of Status fied Copy fitional Copy is fied)	
Mailing Address Amendment Section		treet Address mendment Sect	ion	
Division of Corporations	D	Division of Corporations		
P.O. Box 6327	T	The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation

FILED

Fo Haiti Viv. Inc.

2021 NOV 29 PM 12 57

(Name of Corporation as currently filed with the Florida	a Dept. of State)	SECULTARY DESCRIPTION
N05000001260		SERVICE SERVICES
(Document Num	nber of Corporation (i	known)
Pursuant to the provisions of section 617.1006, Florida Statamendment(s) to its Articles of Incorporation:	utes, this <i>Florida Not</i>	For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpor	ration:	
		The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	ration or incorpora	ted or the appreviation Corp. or Inc.
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRES	<u></u>	
		
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
D. If amending the registered agent and/or registered of new registered agent and/or the new registered office		1a, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		(Florida street address)
		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Registere		
I hereby accept the appointment as registered agent. I am	familiar with and acce	pt the obligations of the position.
	Signature of New Reg	istered 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 X Remove X Add	PT John D V Mike Jo SV Sally S	ones	
Type of Action (Check One)	<u>Title</u>	Name	<u>Address</u>
1) Change Add	<u>v</u>	Robert Dietrich	8395 SW 186 ST Cutler Bay, FL 33157
× Remove			
2) Change Add			
Remove 3) Remove Add Remove			
4) Change Add			
Remove			
5) Change Add			
Remove			
6) Change Add			
Remove			
E. If amending or additional sheet		icles, enter change(s) here: (Be specific)	
			
. , , , ,		·	

The date of each amendment(s) adoption:, if other than the date this document was signed.
Effective date if applicable:
Effective date if applicable: (no more than 90 days after amendment file date)
<u>Note:</u> 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 members and the number of votes cast for the amendment(s) was/were sufficient for approval.

There are no members or members entitled to vote on the amendment(s). The amendment(s) was/were adopted by the board of directors.
11/20/2021 Dated
Signature Veb H
(By the chairman or vice chairman of the board, president or other officer-if directors have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)
Tableune Houtpellous (Typed or printed name of person signing)
Fresident
(Title of person signing)