NZ0000005295

(Rea	uestor's Name)	
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SECRETARY OF STATE

11/18/20



COVER LETTER

TO: Amendment Section Division of Corporations

, NAME OF CORPORATI	The Arts Palace Inh	c.			
	N20000005295				
The enclosed Articles of Art	nendment and fee are sub	mitted for filing.			
Please return all correspond	ence concerning this matt	ter to the following:			
Peter Gustafson					
		(Name of Contact Perso	n)	· · · · · · · · · · · · · · · · · · ·	
The Arts Palace Inc.					
		(Firm/ Company)			
941 sw 21 terrace					
		(Address)			
Ft lauderdale, Florida 3331.	2				
		(City/ State and Zip Cod	le)		
phgustafson@gmail.com					
E	E-mail address: (to be use	d for future annual report	notification	1)	
For further information con	cerning this matter, please	e call:			
Peter Gustafson			6 277 6340		
	(Name of Contact Person	n) (A	rea Code)	(Daytime Telephone Number)	
Enclosed is a check for the	following amount made p	ayable to the Florida Dep	artment of	State:	
□ \$35 Filing Fec	□\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certifi Certifi	Filing Fee cate of Status ed Copy is sed)	
Mailing A	Address	Street	Address		

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

FILED 2020 OCT 13 PM 4: 56

The Arts Palace Inc.

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

SECRETARY OF STATE

N20000005395	ISLL Allassic College
(Document Nu	imber of Corporation (if known)
Pursuant to the provisions of section 617.1006, Florida Sta amendment(s) to its Articles of Incorporation:	atutes, this Florida Not For Profit Corporation adopts the following
A. If amending name, enter the new name of the corpo	eration:
VIM Inc.	The new
name must be distinguishable and contain the word "corpo "Company" or "Co." may not be used in the name.	oration" or "incorporated" or the abbreviation "Corp." or "Inc."
B. Enter new principal office address, if applicable:	NA
(Principal office address MUST BE A STREET ADDRE	<u>SSS</u>)
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	NA
D. If amending the registered agent and/or registered of	
new registered agent and/or the new registered offic	<u>ce address:</u>
Name of New Registered Agent: NA	
New Registered Office Address:	(Florida street address)
<u>NA</u>	, Florida
	(City) (Zip Code)
New Registered Agent's Signature, if changing Register	
I hereby accept the appointment as registered agent. I an	n familiar with and accept the obligations of the position.
	CM D to the control of the control o
	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 X Remove X Add	<u>V</u>	<u>John Doc</u> <u>Mike Jones</u> <u>Sally Smith</u>	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change Add		<u>NA</u>	
Remove			
2) Change Add		<u>NA</u>	
Remove 3) Remove Add Remove		<u>NA</u>	
4) Change Add		NA	
Remove			
5) Change Add		<u>NA</u>	
Remove			
6) Change Add		na	
Remove			
E. If amending or addin (attach additional sheet	ts, if neces		

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The date of each amendment(s) adoption date this document was signed.	o n:			, if other than the
Effective date if applicable:	(no more than 90 day			
	(no more than 90 day	s after amendment fi	le date)	
Note: If the date inserted in this block do	pes not meet the applic	able statutory filing r	requirements, this date will	not be listed as the
document's effective date on the Departm	nent of State's records.			

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

(CHECK ONE)

Adoption of Amendment(s)

	10/9/2020
Dated	
Signatur	
	(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)
	Peter Gustafson
	(Typed or printed name of person signing)

(Title of person signing)