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C. GOLDEN MAR 1 6 2018

COVER LETTER

TO: Amendment Section

Division of Corporations NAME OF CORPORATION: VICIOS II, INC. DOCUMENT NUMBER: P08000012422 The enclosed Articles of Amendment and fee are submitted for filing. Please return all correspondence concerning this matter to the following: MARCELO GOMEZ Name of Contact Person Firm/ Company 503 ROYAL RIDGE STREET Address VALRICO, FL 33594 City/ State and Zip Code 305MARCELOGOMEZ@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (813) 900-5727

Area Code & Daytime Telephone Number MARCELO GOMEZ Name of Contact Person Enclosed is a check for the following amount made payable to the Florida Department of State: S35 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** Street Address Amendment Section Amendment Section Division of Corporations **Division of Corporations** 17 MER 13 PHIR: 4.9. P.O. Box 6327 Clifton Building Tällahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

VICIOS II, INC.

2018 117 . 3 . . . 1 11: 02

	ently filed with the Florida Dept. of State)
P08000012422	
(Document Number	er of Corporation (if known)
Pursuant to the provisions of section 607,1006, Florida Statutes, t its Articles of Incorporation:	this Florida Profit Corporation adopts the following amendment
A. If amending name, enter the new name of the corporation	<u>ı:</u>
GM PROSPERITY INC.	The new
name must be distinguishable and contain the word "corpora" "Corp.," "Inc.," or Co.," or the designation "Corp," "Inc," o word "chartered," "professional association," or the abbreviatio	ration," "company," or "incorporated" or the abbreviation or "Co". A professional corporation name must contain the
3. Enter new principal office address, if applicable:	
Principal office address <u>MUST BE A STREET ADDRESS</u>)	
Enter new mailing address, if applicable:	
(Mailing address <u>MAY BE A POST OFFICE BOX)</u>	
 If amending the registered agent and/or registered office a new registered agent and/or the new registered office addi- 	
Name and Many Boundary of Language	
Name of New Registered Agent	
(Florid	a street address)
New Registered Office Address;	(City) , Florida (Zip Code)
	(City) (Zip Code)
iew Registered Agent's Signature, if changing Registered Age	ent:
hereby accept the appointment as registered agent. I am famili	ar with and accept the obligations of the position.

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.

E vample : <u>X</u> 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)	Title	<u>Name</u>	<u>Addres</u> s
1) Change			
Add			
Remove			
2) Change			
Add			
Remove			
3) Change			
Add			<u> </u>
Remove			
4) Change	-		
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

	sheets, if necessary).	(Be specific)			
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f an amendment	provides for an exch	ange, reclassification	on, or cancellation	n of issued shares	
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<u>provisions for im</u>	provides for an exch uplementing the amer able, indicate N/A)	ange, reclassification adment if not conta	on, or cancellation	n of issued sha <u>res</u> dment itself:	<u>.</u>
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The date of each amendment(s) adoption:	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment fil	e date)
Note: If the date inserted in this block does not meet the applicable statutory filing requiredocument's effective date on the Department of State's records.	rements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
■ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the by the shareholders was/were sufficient for approval.	ne amendment(s)
☐ The amendment(s) was/were approved by the shareholders through voting groups. The formust be separately provided for each voting group entitled to vote separately on the amendment(s).	Howing statement ndment(s);
"The number of votes cast for the amendment(s) was/were sufficient for approval	
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action action was not required.	and shareholder
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and action was not required.	shareholder
3/5/2018 Dated	
Signature	
By director, president or other officer – if directors or officers selected, by an incorporator – if in the hands of a receiver, trusted appointed fiduciary by that fiduciary)	have not been e, or other court
MARCELO GOMEZ	
(Typed or printed name of person signing)	<u> </u>
PRESIDENT	
(Title of person signing)	