

(Requestor's Name)
, ,
(Address)
(Address)
(City/State/Zip/Phone #)
(0.13) 2.12.17.11.01.01.79
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

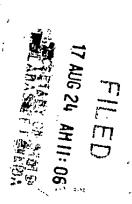
Office Use Only



700302710387

08/24/17--01004--023 **35.00





COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: Vivi's Child Care I	nc	
DOCUMENT NUM	BER: P09000047999		
	of Amendment and fee are su	bmitted for filing.	
Please return all corre	spondence concerning this ma	tter to the following:	
	Vivian Lopez		
		Name of Contact Person	1
	vivi's child care		•
		Firm/ Company	
	7955 Crespi Blvd		
	***************************************	Address	
	Miami Beach, Fl. 33141		
		City/ State and Zip Cod	e
vlope	ezguedes@gmail.com		
		sed for future annual report	notification)
For further information	on concerning this matter, pleas	se call:	`.v
vivian lopez		305 at (de & Daytime Telephone Number
Name	of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a check for	or the following amount made	payable to the Florida Depa	artment of State:
\$35 Filing Fee	□\$43.75 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		Amene Divisio Clifton	Address Iment Section on of Corporations Building executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

FILED 17 AUG 24 AM II: 06

	O	of the state of th
Vivi's Child Care Inc		一人 人们会是一个一个人的
(Name	of Corporation as curren	tly filed with the Florida Dept. of State)
P09000047999		
	(Document Number	of Corporation (if known)
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006. Florida Statutes, thi	s Florida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:	
		The new
	ation "Corp," "Inc," or	ion," "company," or "incorporated" or the abbreviation "Co". A professional corporation name must contain the "P.A."
B. Enter new principal office address, (Principal office address MUST BE A S		
C. Enter new mailing address, if appli	cable	
(Mailing address MAY BE A POST OFFICE BOX)		7955 Crespi Blvd
		Miami Beach, Fl 33141
 If amending the registered agent an new registered agent and/or the new 		
Nanw of New Registered Agent	Vivian Lopez	
Name of New Registered Agent	7955 Crespi Blvd	
	(Florida s	treet address)
New Registered Office Address:	Miami Beach	. Florida 33141
		(City) (Zip Code)
New Registered Agent's Signature, if c	hanging Registered Ages	sf•
		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 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	
\underline{X} Remove	<u>v</u>	Mike Jones	
X Add	\underline{SV}	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
i) Change			
Add			
Remove			
2) Change		_	
Add			
Remove			***************************************
3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			,
6) Change			
Add			
Remove			

If amending or adding additional Arti (Attach additional sheets, if necessary).	(Be specific)
provisions for implementing the ame	nange, reclassification, or cancellation of issued shares, endment if not contained in the amendment itself:
(if not applicable, indicate N/A) A	
	·
	·

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 file date)
	(no more than 90 days after amendment file date)
Note: If the date inserted in this block does document's effective date on the Department	not meet the applicable statutory filing requirements, this date will not be listed as the of State's records.
Adoption of Amendment(s)	HECK ONE)
The amendment(s) was/were adopted by the shareholders was/were sufficient for	e shareholders. The number of votes east for the amendment(s) rapproval.
	the shareholders through voting groups. The following statement ag group entitled to vote separately on the amendment(s):
"The number of votes east for the an	endment(s) was/were sufficient for approval
by	oting group)
₍	oting group)
☐ The amendment(s) was/were adopted by the action was not required.	ne board of directors without shareholder action and shareholder
☐ The amendment(s) was/were adopted by the action was not required.	e incorporators without shareholder action and shareholder
8/1/2017 Dated	
Signature	
selected, by an in	esident or other officer – if directors or officers have not been corporator – if in the hands of a receiver, trustee, or other court may by that fiduciary)
Javier Di	az
	(Typed or printed name of person signing)
President	Jour Diez
	(Title objection signing)