P17000011651

(Re	questor's Name)		
(Address)			
(Address)			
(Cit	y/State/Zip/Phone	9 #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(Do	cument Number)		
Certified Copies	_ Certificates	s of Status	
Special Instructions to	Filing Officer		

Office Use Only



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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	DRATION: PV BUSINESSSO	LUTIONS INC.			
	1BER: P17000011651				
	es of Amendment and fee are su	bmitted for filing.			
Please return all corr	respondence concerning this ma	tter to the following:			
	PATRICIA VALLE				
		Name of Contact Person	1		
	PV BUSINESS SOLUTIONS INC.				
		Firm/ Company			
	3600 S. STATE RD 7 SUITE 204				
	Address				
	MIRAMAR, FLORIDA 330	23			
		City/ State and Zip Code	<u> </u>		
	pat849066@yahoo.com				
-	E-mail address: (to be us	sed for future annual report	notification)		
For further informat	ion concerning this matter, pleas	se cali:			
PATRICIA VALLE	;	at () 696-2085 de & Daytime Telephone Number		
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	□\$43.75 Filing Fee & Certificate of Status	☐S43.75 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	Address Iment Section on of Corporations Building executive Center Circle		

Tallahassee, FL 32301



17 FEB 23 Fil 1:53

FLORIDA DEPARTMENT OF STATE Division of Corporations

February 15, 2017

PATRICIA VALLE PV BUSINESS SOLUTIONS INC 3600 S. STATE RD 7 - STE. 204 MIRAMAR, FL 33023

SUBJECT: PV BUSINESS SOLUTIONS INC.

Ref. Number: P17000011651

We have received your document for PV BUSINESS SOLUTIONS INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 217A00003046

Irene Albritton Regulatory Specialist II

www.sunbiz.org

Articles of Amendment

' to

Articles of Incorporation

of

P17000	of Corporation as curr	ently filed with	1 the Florida Dept. of	State)	
(17000	(Document Number	er of Corporation	on (if known)		
Pursuant to the provisions of section 607, its Articles of Incorporation:	1006, Florida Statutes, t	his <i>Florida Pro</i>	<i>ofit Corporation</i> adopt	s the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:	Ē			
name must be distinguishable and con "Corp.," "Inc.," or Co.," or the design word "chartered," "professional associa	ation "Corp." "Inc." c	or "Co" A pr			
B. Enter new principal office address,					
(Principal office address <u>MUST BE A S</u>	TREET ADDRESS)			<u> </u>	
					i i Herion Lawren
C. Enter new mailing address, if appli (Mailing address MAY BE A POST)				ි. රා ලා	سم. 1 سان
					دوو ۱
				: 2	
D. If amending the registered agent an new registered agent and/or the new			ida, enter the name o	f the	
	-PV BUSINESS SOLU	TIONS INC.	Patricia	Valle	
Name of New Registered Agent	3600 \$. STATE RD 7	SUITE 204	1 CC. KI CIA	y certe	
		a street address)			
New Registered Office Address	MIRAMAR		Fl	33023 orida	
Her Registered Office Hadress		(City)	, * i	(Zip Code)	
New Registered Agent's Signature, if c I hereby accept the appointment as regist			cept the obligations of	the position.	
Pa	tricion	Vall	2		

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.

Mike Jones, V as Removi	e, and Sai	lly Smith, SV as an Add	
Example: X Change	<u>PT</u>	John Doc	
X Remove	$\underline{\mathbf{V}}$	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One) 1) Change	Title	Patricia Valle	3600 S. State Rd 1
Add			Miramar, Fl 330
2) Change Add Remove	_		
3) Change Add Remove			
4) Change Add Remove			
5) Change Add Remove			
6) Change Add			
Remove			

	ticles, enter chan (Be specific)			
		 	<u> </u>	
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	<u></u>			
				
			<u></u>	
				
f an amendment provides for an exc	change, reclassific	cation, or cancella	tion of issued sha	res,
mineriamonis provides tot all CAV	endment if not co	ontained in the an	endment itself:	
provisions for implementing the am				
provisions for implementing the am (if not applicable, indicate N/A)				
provisions for implementing the am				
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provisions for implementing the am				

The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date <u>if applicable</u> :	
(no more than 90 de	ays after amendment file date)
Note: If the date inserted in this block does not meet the applicabl document's effective date on the Department of State's records.	e statutory filing requirements, this date will not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
☐ The amendment(s) was/were adopted by the shareholders. The nu by the shareholders was/were sufficient for approval.	mber of votes cast for the amendment(s)
☐ The amendment(s) was/were approved by the shareholders through must be separately provided for each voting group entitled to vote	
"The number of votes cast for the amendment(s) was/were su	ifficient for approval
by	
(voting group)	
☐ The amendment(s) was/were adopted by the board of directors wit action was not required.	hout shareholder action and shareholder
The amendment(s) was/were adopted by the incorporators without action was not required.	shareholder action and shareholder
February 8, 2017 Dated	
Signature Vall	- Le
(By a director, president or other officer - selected, by an incorporator – if in the ha appointed fiduciary by that fiduciary)	
Patricia Valle	
(Typed or printed name	e of person signing)
President	
(Title of p	erson signing)