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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

NAME OF CORPO	RATION: VL SOLUTIONS	INC			
DOCUMENT NUM	BER: P18000088712				
	of Amendment and fee are su	ibmitted for filing.			
Please return all corro	espondence concerning this ma	tter to the following:			
	VALERIA DEL SOCORRO	LOPFZ			
		Name of Contact Perso	n		
	VL SOLUTIONS INC				
		Firm/ Company			
	1012 SW 4 AVE APT 2				
	Address				
	MIAMI, FL. 33130				
		City/ State and Zip Cod	e		
VAI	.ERIALPZ07@GMAIL.COM				
		sed for future annual report	notification)		
			,		
For further information	on concerning this matter, pleas	se call:			
VALERIA DEL SOC	CORRO LOPEZ	at (	346-8802		
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		Street Address Amendment Section			
Division of Corporations		Division of Corporations			

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

## Articles of Amendment to Articles of Incorporation of

(Name	of Corporation as curren	tly filed with the Florida Dept. of S	tate)	
18000088712		<u></u>		
	(Document Number	of Corporation (if known)		
tursuant to the provisions of section 607, s Articles of Incorporation:	1006, Florida Statutes, this	Florida Profit Corporation adopts t	the following an	nendment(
. If amending name, enter the new na	ame of the corporation:			
NOT APPLICA	IGE / NO NAME	CHAME	Th	e new
ame must be distinguishable and con Corp.," "Inc.," or Co.," or the design ord "chartered," "professional associa	nation "Corp." "Inc," or	"Co". A professional corporation i	" or the abbre name must cont	eviation ain the
Finter new principal office address	if applicable:	1012 SW 4 AVE APT 2		
Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS )		MIAMI, FL 33130		
			<b>∑</b> 12 :	 Os
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		1012 SW 4 AVE APT 2		
		MIAMI, FL 33130		الما ي
				<u> </u>
			<u> </u>	<u> </u>
. If amending the registered agent an new registered agent and/or the ne			the >>' r	<i>?</i> 2
VALERIA DEL SOCORRO I		RO LOPEZ		
Nume of them Registered Agent	1012 SW 4 AVE APT 2			
		treet address)	<del></del>	
v n i lom di	MIAMI	Plan	33130	
New Registered Office Address:			(Zip Code)	
Name of New Registered Agent  New Registered Office Address:	• • • • • • • • • • • • • • • • • • • •	treet address), Flor (City)	ida	

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 FTD.

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	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>SV</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	Ρ	LOPEZ, VALERIA D	1012 SW 4TH AVENUE APT. 3
Add			MIAMI, FL 33130
X Remove			
2) Change	P	LOPEZ, VALERIA DEL SOCORRO	1012 SW 4TH AVENUE APT. 2
$\frac{X}{X}$ Add			MIAMI, FL 33130
Remove			
3 ) Change			· · · · · · · · · · · · · · · · · · ·
Add			
Remove			
4) Change			
Add			
Add Remove			
5) Change			
Add			
Remove			
6) Change			
Add	<del></del>		
Remove			

• • • • • • • • • • • • • • • • • • •	
E. If amending or adding additional Articles, enter change(s) here:	
(Attach additional sheets, if necessary). (Be specific)	
LEGAL NAME LISTED INCORRECT - NAME CHANGE	
	<del></del>
PHYSICAL INFO INCORRECT -APARTMENT NUMBER CHANGE	
, , , , , , , , , , , , , , , , , , ,	
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	•
F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	
provisions for implementing the amendment if not contained in the amendment itself:	
(if not applicable, indicate N/A)	
(i) not applicable, that are 1974)	
	•
	<u>-</u>
· · · · · · · · · · · · · · · · · · ·	

The date of each amendment	t(s) adoption: 10/23/2018	, if other than the
date this document was signed		
Effective date if applicable:	10/23/2018	
isnective date <u>if applicative</u> .	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, this date whe Department of State's records.	will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
☐ The amendment(s) was/web by the shareholders was/web.	re adopted by the shareholders. The number of votes cast for the amendment(s) ere sufficient for approval.	
	re approved by the shareholders through voting groups. The following statement ed for each voting group entitled to vote separately on the amendment(s):	
	s cast for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
☐ The amendment(s) was/wer action was not required.	re adopted by the board of directors without shareholder action and shareholder	
action was not required.	re adopted by the incorporators without shareholder action and shareholder	
10/23 Dated	/2018	
Signature	John Jor	
	By a director, president or other officer – if directors or officers have not been elected, by an incorporator – if in the hands of a receiver, trustee, or other court	
	ppointed fiduciary by that fiduciary)	
	VALERIA DEL SOCORRO LOPEZ	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	<u> </u>